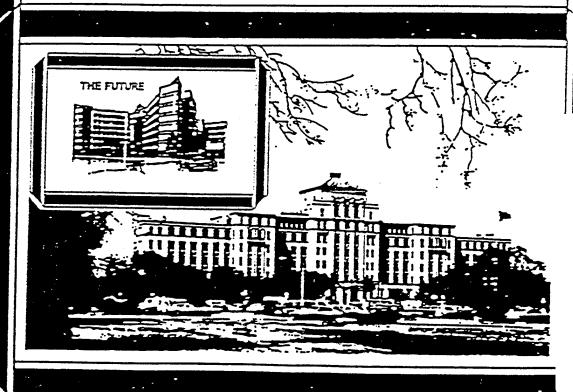




DEPARTMENT OF CLINICAL INVESTIGATION

ANNUAL RESEARCH PROGRESS REPORT

FISCAL YEAR 1995 VOLUME II



BROOKE ARMY MEDICAL CENTER FORT SAM HOUSTON, TEXAS 78234

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Date Command and account 1

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Detail	Summary.	Sheet

Date: 1 Dec 95 Protocol Number: A-93-03 Status: Ongoing

Title: Hypothyroid Induced Hypometabolic State as a Possible Diagnostic and Therapeutic Maneuver as Tested in a Mouse Model Utilizing PET Scanning

Start date:	Estimated completion date:
Principal Investigator: MAJ Kevin Carlin, MC	Facility: Brooke Army Medical Center
Department/Service: Medicine/Endocrinology Key Words: Mouse, Mus musculus, PET	Associate Investigator(s): COL Albert Thomason, MC LTC Ian Thompson, MC Isidoro Chapa
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:

Objective(s): Mice will be injected in the thigh with a mouse bladder cancer cell line and then randomized to an induced hypothyroid arm and a control arm. A PET scan will then be done to assess the metabolic status of the tumor burden verses the rest of the mouse body.

Technical Approach: Mouse bladder cancer cells maintained in cell cultures will be injected into the thigh of the mice. The mice will then be randomized to one of two groups: euthyroid and hypothyroid with the later induced by medication. PET scans using radioactive isotopes tagged glucose will then be done to see if the tumor masses are affected by thyroid hormone manipulation as compared to the rest of the mouse body.

Progress: Project is currently on hold due to funding issues with PET Scan at UTHSC. We pay nothing to use so we only go on standby.

Date: 15 Aug 94 Protocol Number: A-93-04 Status: Ongoing

Title: Production of Monoclonal Antibodies to Rhodanese and Chaperonin Epitopes in Ascites Tumors in BALB/c Mice for Use as Molecular Probes in Support of Clinical Investigation Protocol C-18-88

Estimated completion date: Oct 94
Facility:
Brooke Army Medical Center
Associate Investigator(s):
Kimberly Doody
-
<u> </u>
Estimated cumulative OMA cost:
rting period:0
te: 0
view results:

Objective(s): To produce monoclonal antibodies to specific epitopes on rhodanese and the chaperonins (CPN $_{60}$ and CPN $_{10}$) for use as biochemical molecular probes.

Technical Approach: As outlined in the research protocol.

Progress: Ten mice have received two immunizations with chaperonin-adjuvant immunogens. Four mice have been immunized against CPN $_{60}$, three immunized against CPN_{60} and the remaining three immunized with DNA K. All 3 proteins have been prepared in lipid micelles containing trehalose dimycolate and monophosphoryl lipid A (RIBI adjuvant system). A volunteer technician has been trained to perform ELISA screening/titering of sera. The four mice immunized with CPN60 were screened for antibodies to CPN60. All four mice demonstrated anti-CPN $_{60}$ antibodies when screened at a 1:10 dilution as compared to normal mouse sera (obtained commercially) at the same dilution. these CPN_{60} positive mice were, on separate occasions, given a third immunization (IV) and euthanized three days later. Their spleens were removed for fusion to SP2/0 culture lymphocytes. Following fusion, numerous HAT resistant colonies were observed indicating a successful procedure for forming hybridoma cells. However, neither fusion resulted in a colony of cells that produced ant-CPN $_{60}$ antibodies (as evidenced by ELISA). Due to the excessive

A-93-04 (continued)

age of the mice that had received immunizations, it is unlikely that the cells of their spleens would result in successful fusions. The remaining 6 mice were therefore sacrificed by the technicians of the DCI animal facility. The military technician who had been trained in tissue culture techniques for propagation and closing of the hybridomas generated by this fusion has departed DCI. A BRAG volunteer has been trained in these techniques and is presently prepared to attempt a fusion. Myeloma SP2/0 cells have been propagated successfully by this volunteer without contamination and have viability exceeding 90%. Three mice have been ordered to immunize with CPN60. However, prior to immunization a small blood sample (500 ul) will be obtained from each mouse for use as a negative pre-immune control (instead of commercial normal mouse serum) in ELISAs to screen the effectiveness of immunization prior to sacrifice of an animal for its spleen.

Date: 1 Dec 95 Protocol Number: A-93-05 Status: Terminated Title: Evaluation of a Prototype Double Lumen Multiorificed Catheter for Resuscitating Swine from a Lethal Air Embolism Start date: Estimated completion date: Principal Investigator: Facility: MAJ Jon Hinman, MC Brooke Army Medical Center Department/Service: Associate Investigator(s): Surgery/Anesthesiology MAJ Paul Mongan, MC Key Words: Swine, Porcine, Sus scrofa, complications: air embolism, position: sitting, surgery: neurosurgery Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: Total number of subjects enrolled to date: Periodic review date: _ _ Review results: Objective(s): 1) To evaluate the flow characteristics of the Cook Critical Care double lumen multiorificed catheter. 2) To establish the lethal dose of air (ml/kg) embolized into the sagittal sinus of a swine. 3) To evaluate the percentage of an air embolus aspirated by a Cook Critical Care double lumen multiorificed catheter. 4) To evaluate the ability of the Cook Critical Care double lumen multiorificed catheter to resuscitate a swine model from a lethal venous embolus. 5) To compare the results of a Cook Critical Care double lumen multiorificed catheter against an accepted standard; the Bunegin-Albin 16 Ga multiorificed catheter (flow, % aspiration, resuscitation).

Technical Approach: As outlined in the research protocol.

Progress: Study has been terminated. Results have been finalized and manuscript was prepared.

Protocol Number: A-93-06 Status: Ongoing Date: 1 Dec 95 Title: Titanium 13-13 Internal Fixation Plates in Comparison to CP Titanium Plates in the Healing of Long Bone Osteotomies in a Goat Model Estimated completion date: Start date: Principal Investigator: Facility: Brooke Army Medical Center CPT Christopher Vaughn, MC Associate Investigator(s): Department/Service: COL Allan Bucknell, MC Surgery/Orthopaedics CPT Matthew Horton, MC Key Words: Estimated cumulative OMA cost: Cumulative MEDCASE cost: Number of subjects enrolled during reporting period: _ Total number of subjects enrolled to date: _ Review results: Periodic review date: Objective(s): To determine if Titanium 13-13 Plates perform more effectively in long bone fracture fixation than CP Titanium plates, decreasing the time to union, increasing ultimate strength and reducing stress shielding. Technical Approach: A total of twenty (20) adult domestic goats will be studied. Plates will be placed on the lateral side of each femur. Plates used will be six to eight hole, narrow elongation plates. Six to eight goats will be sacrificed, nd histologic and microbiologic setting will be performed. Progress: We have completed the implant, euthanasia and specimen harvesting; Have yet to complete data collection on specimens. Study is completed but will remain open until April 1996.

Date: 1 Dec 95 Pro	tocol Number:	A-94-01	Status: Ongoing
Title: Effect of Topicall the Guinea Pig	y Applied Crys	stalline L-lys	ine on Wound Healing i
Start date: 25 Oct 93		Estimated co	mpletion date:
Principal Investigator: Eleanor Ayala, MA		Facility: Brooke Army	Medical Center, Texas
Department/Service: Department of Clinical Inv	estigation	Associate In	vestigator(s): nt, Jr., MS
Key Words: Guinea Pig, Cav wound healing, skin punch topical therapy, L-lysine,	biopsies,		
Cumulative MEDCASE cost:		Estimated cu	mulative OMA cost:
Number of subjects enrolle Total number of subjects e Periodic review date:	nrolled to dat	:e:	
Objective(s): To determin enhances reepithelializati			

enhances reepithelialization and minimizes scar formation in healing punch biopsies using the hairless guinea pig model.

Technical Approach: Four male, 500-600g, euthymic hairless Hartley guinea pigs will be used. Test agent will be applied to each of four test sites on one side of the animal (determined by card shuffle) and no agent will be applied to the four contralateral control sites.

Progress: Wound contraction was significantly retarded in the lysine treated sits. Histological stains showed that the treated sites had filled in with collagen. The monoclonal antibodies to fibroblasts and macrophages were not effective on formalin-fixed, paraffin-embedded tissues. An addendum is being submitted to identify elastin, collagen type and substance P in the formalin-fixed, paraffin-embedded tissues.

Date: 1 Oct 95 Protocol N	umber: A-94-02	Status:	Ongoing
Title: Bleeding Complications D aries) Undergoing Transbronchial		ypertension i	n Sheep (<u>Ovis</u>
Start date: 15 Nov 93	Estimate	d completion	date:
Principal Investigator: MAJ Michael J. Morris, MC	Facility Brooke A		enter, Texas
Department/Service: Medicine/Pulmonary Disease	MAJ Mark	Associate Investigator(s): MAJ Mark Peacock, MC LTC William C. Lloyd, MC	
Key Words:		•	
Cumulative MEDCASE cost:	Estimate	d cumulative	OMA cost:
Number of subjects enrolled duri Total number of subjects enrolle			
Periodic review date:			

Objective(s): This project will determine if there is an increased risk of significant hemorrhage from transbronchial biopsy secondary to pulmonary hypertension. A sheep model with experimentally-induced pulmonary hypertension will be utilized as the basis for this protocol.

Technical Approach: Ten adult sheep, weighing 25-35 kg will be used. Sheep will be anesthetized with ketamine, xylazine and atropine. Once anesthetized, the right subclavian vein will be instrumented with a polyvinyl catheter and a pulmonary artery catheter will be inserted into a pulmonary artery. The carotid artery will be cannulated to continuously monitor systemic arterial pressures.

Progress: Study is complete and data has been compiled. Results were published in a manuscript which was accepted for publication.

Date: 1 Dec 95 Prot	ocol Number: A-94-0	3 Status: Ongoing
Title: An Improved Histolo Tissue Morphology in Normal	gical Method for Hyd Guinea Pig (<u>Cavia p</u>	ration and Preservation of orcellus) Pancreas
Start date: 16 Dec 93	Estima	ted completion date:
Principal Investigator: Eleanor Ayala, MA	Facili Brooke	ty: Army Medical Center, Texas
Department/Service: Department of Clinical Inve	<u>:</u>	ate Investigator(s): chael H. Enghardt, MC
Key Words:		
Cumulative MEDCASE cost:	Estima	ted cumulative OMA cost:
Number of subjects enrolled Total number of subjects en Periodic review date:	rolled to date:	

Objective(s): To determine if the substitution of a glycerol solution for the alcohols routinely used during the rehydration of formalin-fixed, paraffin-embedded tissue will give better preservation of morphology of normal guinea pig pancreas.

Technical Approach: Tissue from four male, 500-600g, euthymic hairless Hartley guinea pigs will be used. After euthanasia under a previous IACUC protocol, the pancreas from each euthanized animal will be collected and placed in zinc-formalin fixative for 24 hours at room temperature. A 5mm cube of tissue will be cut through the center of each pancreas and embedded in paraffin. Sixteen serial sections will be cut from each paraffin block. Sections will be kept in numerical order so that alternating slides will form two groups of eight slides each. One set will serve as control and will be processed by the routine fixation procedure using alcohol. The other set will serve as test and will be processed by the modified fixation technique using glycerol instead of alcohol.

Progress: No differences were observed between tissue processed by the routine histological procedures and the modified procedure employing glycerol solutions. There was no unfavorable alteration of tissue. The procedures approved in addendum #1 are currently being tested manually and will be tested

A-94-03 (continued)

on the routine automatic processor. The successful outcome of this procedure will complete the tissue processing from formalin fixation to embedding, sectioning and staining and application of a patent for the process.

Date: 1 Dec 95	Protocol Number:	A-94-04	Status: Ongoing
Title: Reversible Trans Possible Therapeutic Ma			
Start date:		Estimated co	ompletion date:
Principal Investigator: MAJ Kevin Carlin, MC		Facility: Brooke Army	Medical Center, Texas
Department/Service: Medicine/Endocrinology Key Words:		CPT Alisan I	Thomason, MC
Cumulative MEDCASE cost	::	Estimated cu	umulative OMA cost:
Number of subjects enro Total number of subject Periodic review date: _	s enrolled to da	te:	
Objective(s): To show	at the rudimenta	ry cellular le	evel the growth of breas

Objective(s): To show at the rudimentary cellular level the growth of breast cancer cells is independent of the variable levels of thyroid hormone they are cultured in. We expect there to be little effect upon growth in culture despite variable levels of thyroid hormone in the serum free culture medium.

Technical Approach: If the above indicates on a cellular level that breast cancer cells are relatively independent of thyroid hormone, then we will examine breast cancer cells in vivo. This will be done by the injection of breast cancer cells into mice thighs and randomization into control arm and hypothyroid arm. Radioactive tagged C14 glucose will then be injected into the mice as an indirect measurement of metabolism.

Progress: $MgSO_4$ and digoxin were shown to have an additive effect in prolonging A-V conduction.

3-94-0E

Ctatura.

Date: 1 Dec 95 Flococol R	Compet: A-94-05 Status: Ongoing
Title: The Effect of Magnesium of Fibrillation	on Ventricular Rate Control During Atrial
Start date: 1 Dec 93	Estimated completion date:
Principal Investigator: Bernard J. Rubal, Ph.D.	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Cardiology Key Words:	Associate Investigator(s): MAJ Maureen A. Arendt, MC John Ward, Ph.D.
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Total number of subjects enrolled	g reporting period: to date: Review results:
Objective(s): 1) To examine the	efficacy of parenteral MgSO4 in the acute

Objective(s): 1) To examine the efficacy of parenteral MgSO⁴ in the acute management of rapid ventricular rates in an animal model with atrial fibrillation, and 2) to determine whether MgSO⁴ and digoxin have additive effects in controlling ventricular rates.

Technical Approach: All animals will be given 0.07 mg/Kg digoxin intravenously after the initial 30 minute period and followed for 3.5 hours. Ventricular rates will be obtained at baseline, every five minutes for the first 30 minutes, and then every 30 minutes for 3.5 hours. In addition to ventricular rate control, the hemodynamic stability of MgSO₄ therapy will be assessed.

Progress: Study is still ongoing. There is no reportable data.

Date: 1 Dec 95 Protocol Nu	mber: A-94-06 Status: Ongoing
Title: An Experimental Rat Model	of Post-Pneumonic Empyema
Start date: 1 Apr 94	Estimated completion date:
Principal Investigator: MAJ Michael J. Morris, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Pulmonary	Associate Investigator(s): LTC J. Wm Kelly, MC
Key Words:	MAJ Julia Morgan, MC CPT Robert Durnford, MC CPT Thomas Mego, MC
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled Periodic review date:	to date:

Objective(s): 1) Development of dose response curve by administration of different aerobic bacteria in various concentrations by direct tracheal inoculation into rat lungs to determine which organism will cause pneumonia and empyema without causing sepsis. 2) Development of a rat model of post-pneumonic empyema which can be reliably reproduced in at least 70% of animals infected with less than 10% mortality.

Technical Approach: Rats will be anesthetized with 60mg/kg Ketamine and 4mg/kg Rompun IM prior to the procedure. Inoculation will be accomplished using a modified 16 gauge intravenous catheter of at least two inches in length. The needle stylet is to be modified by cutting the end of the needle and filing it down smooth. The needle will be bent to a 145 degree angle to conform with the rat's oral airway. The modified needle will be inserted into the trachea and proper placement will be confirmed by palpation of the needle against the cartilaginous rings of the trachea. An 18 gauge pediatric central venous catheter will be passed through the needle and down the left mainstem bronchus. Alternately, a semirigid 3.5 plastic catheter will be used after visualization of the vocal cords with an otoscope.

Progress: Study is still ongoing. There is currently no reportable data.

Date: 1 Dec 95 Protocol Nur	mber: A-94-07 Status: Ongoing
Title: Production of Mouse Positiv Rabies FA Test	ve and Negative Control Slides for Use in
Start date:	Estimated completion date:
Principal Investigator: David Culak	Facility: Brooke Army Medical Center, Texas
Department/Service: Regional Veterinary Laboratory	Associate Investigator(s): Michael Gray
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled	
Periodic review date:	Review results:
oli - time (-) - Ma produgo pogativo	and nositive control slides for use in th

Objective(s): To produce negative and positive control slides for use in the Rabies Fluorescent Antibody Test (FA). One negative and one positive control slide are used for each FA test performed on diagnostic specimens.

Technical Approach: Twelve, 3-5 week old mice are anesthetized with halothane and then injected intracranially (IC) with 0.03 mg of CVS-11 rabies virus suspension utilizing a 1/4 inch, 27 gauge needle and tuberculin syringe. Mice injections will be performed in Bldg 2630, room 169. Inoculated mice will be observed daily for signs of rabies infection. As mice exhibit symptoms of rabies and become moribund, they are humanely euthanized by CO₂ asphyxiation (exposure to 100% CO₂ for five minutes). After mice are dead, brain and brain stem are collected, impression smears prepared and slides held at -70 degrees C for future use.

Progress: We have not had to prepare control slides this year. We will have enough for another year. A new set of control slides will be made at a later date.

Date: 1 Dec 95	Protocol Number:	A-94-08	Status: Ongoing
Title: Blood Amplific Blood Cell Transfusio			
Start date:		Estimated co	mpletion date:
Principal Investigato LTC Rhonda L.S. Cornu		Facility: Brooke Army	Medical Center, Texas
Department/Service: Surgery/Urology		Associate Investigator(s): MAJ Russell Martin, MC CPT Christopher Bandy, MC	
Key Words:		cri cmriscop	mer bandy, MC
Cumulative MEDCASE co	st:	Estimated cu	mulative OMA cost:
Number of subjects en Total number of subjec			
Periodic review date:	Re	view results:	

Objective(s): To determine if transfusion with PEP treated RBCs maintains oxygen consumption with less increase in cardiac output than control transfusion in anemic hypoxia, in the anesthetized dog.

Technical Approach: Adult, splenectomized dogs weighing 8-15 kgs will be used. On the day of surgery, they will be fasted overnight, and anesthesia induced and maintained with 2-3% isoflurane. Ventilators will be set to deliver 10 breaths per minute (10 cc/kg body weight) at 60% oxygen and adjusted to maintain a PCO_2 between 35-45. A 5 French Swan-Ganz catheter will be placed via the external jugular vein to allow mixed venous blood sampling and determination of cardiac output by thermodilution.

Progress: There have been no substantial changes in part I of A-94-08. The protocol is active and there is only one substantive change, the estimated time of completion. Delays in funding transfer from MRDC to BAMC and receiving equipment makes the revised estimated completion date of December 1995. Fourteen dogs have been splenectomized to date. One died postoperatively and three have been used in the experimental protocol. The model of euvolemic anemia causing a marked increase in cardiac output in the dog has been established. All the required equipment has been procured, and the blood treatment methodology verified. No trends can be predicted yet.

Protocol Number: A-94-09 Status: Ongoing Date: 1 Dec 95 Title: Botulinum Toxin Detection by Mouse Bioassay Estimated completion date: Start date: Facility: Principal Investigator: Brooke Army Medical Center, Texas Michael Gray Associate Investigator(s): Department/Service: Regional Veterinary Laboratory David Culak Key Words: Estimated cumulative OMA cost: Cumulative MEDCASE cost: Number of subjects enrolled during reporting period: ___ Total number of subjects enrolled to date: Periodic review date: __ _ Review results: _ Objective(s): To establish and maintain a standing procedure for the mouse bioassay as a means for detecting Clostridium botulinum neurotoxin in cultures, food extracts, serum, and fecal specimens. Technical Approach: Specimens such as food, can products, patient serum and feces suspected of containing botulinum toxin will be submitted to this laboratory for analysis. In order to rule out suspect botulinum toxin in a patient, the mouse bioassay is used which is rapid, specific, and sensitive. Specimens are processed, divided into three groups: non-heated, heated, and non-heated with antitoxin. Mice are sedated, inoculated IP with 0-5 ml of specimen and appropriated botulinum toxin controls (non-heated, heated, and nonheated with antitoxin) and observed for typical signs of the neurotoxin. Progress: The number of mice used to test three specimens exceeded the 72

94-1702 13 Jul 94 McLeod - Stool Sample 25 mice 94-2343 12 Oct 94 Lipinski - Stool/Serum 25 mice 94-0244 17 Feb 95 Multiquist-Stool 25 mice

received.

mice authorized by this protocol. However, we were unable to predict the demand of mice because it was dependent upon the number of samples we

Date: 1 Dec 95	Protocol	Number:	A-94-10	Status:	Ongoing	
Title: Biosynthesis o Rabbits (Replaced A-90		nal Anti	-peptide and	l Anti-protei	n Antibodies	in
Start date:			Estimated	completion d	late:	
Principal Investigator Gerald R. Merrill, Ph.			Facility: Brooke Arm	ny Medical Ce	enter, Texas	
Department/Service: Department of Clinical	Investiga	ation	Associate	Investigator	:(s):	
Key Words:						
Cumulative MEDCASE cost	t:		Estimated	cumulative O	MA cost:	
Number of subjects enro Total number of subject Periodic review date:	ts enrolle	ed to dat	e:			- -
Objective(s): To produ	uce polyc	lonal ant	isera to pe	ptides and p	roteins for u	ıse

Objective(s): To produce polyclonal antisera to peptides and proteins for use in conformational studies of selected proteins and for development and use in immunoassays for quantification of proteins.

Technical Approach: Rabbits will be acclimated for 7 days prior to obtaining an initial blood sample. No more than 6 rabbits will be used at any period. Blood will be drawn into heparinized syringes via ear arteries by animal facility personnel. Prior to venipuncture, the rabbits will be placed into restraint and the hair removed on one ear using hair clippers. Alcohol will be sprayed onto the ear prior to venipuncture to improve the visibility of the vein and to disinfect the venipuncture site.

Progress: There is no reportable data.

Date: 1 Dec 95	Protocol Number:	A-94-11	Status:	Ongoing
Title: Temperature Temperature Monitori and Passive Heat Exc Surgery	ng with Regional Cor	tical Brain	Temperature	During Active
Start date:		Estimated c	ompletion d	late:
Principal Investigat MAJ Paul D. Mongan,	•	Facility: Brooke Army	Medical Ce	enter, Texas
Department/Service: Surgery/Anesthesiolo	gy & Op Svc	Associate I	nvestigator	c(s):
Key Words:				
Cumulative MEDCASE c	ost:	Estimated c	umulative (OMA cost:
Number of subjects e Total number of subj Periodic review date Objective(s): The p correlation between surgery model.	ects enrolled to dat : Re urpose of this inves	ce: eview results stigation is	to describe	e the
Technical Approach: areas of the brain a the animals will be the cooling period, done in surgery. The veins will be evaluated	nd central blood ves allowed to decrease the animals will be e changes in tempera	ssels of the as is common warmed to a ature in the	body. The during sur normal temp brain and t	temperatures or gery. After perature as is the central

Progress: Study remains ongoing. Data collection continues.

undergo surgery more safely.

cooling and rewarming during brain surgery. This knowledge will help patients

Date: 15 Nov 95 Protocol Number:	A-95-01 Status: Ongoing			
Title: Optimal Pleurodesis: A Comparia	son Study of the Effects of Pleural			
Start date: 28 Dec 94	Estimated completion date:			
Principal Investigator: MAJ Michael Halligan, MC	Facility: Brooke Army Medical Center, Texas			
Department/Service: Surgery/Cardiothoracic Surgery Service	- '			
Key Words:	COL Greg A. Bowman, MC			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:			
Number of subjects enrolled during reporting period:				

Objective(s): To compare the abilities of tetracycline, doxycycline, TALC and HCL to effect pleurodesis relative to the gold standard of pleural abrasion in the rabbit pleura.

Technical Approach: Sixty rabbits will be randomized into six treatment categories. Both hemithoraces will be utilized for a total of 12 hemothoraces. Twenty will receive thoracotomy and mechanical pleurabrasion under general anesthesia with post-op analgesia. The remainder will receive intrapleural instillation of a randomly assigned sclerosing agent with post-procedure and analgesia.

Progress: There is no data available at this time. Study is ongoing. An annual review is required during the month of December 1995.

Date: 15 Nov 95 Protocol Number:	A-95-02 Status: Ongoing
Title: Flow-Wire Validation Study in th	ne Porcine Model (<u>Sus</u> <u>scrofa</u>)
Start date: 12 Jan 95	Estimated completion date:
Principal Investigator: MAJ Howard Zimring, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Cardiology Service	Associate Investigator(s): Bernard J. Rubal, Ph.D.
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Re	te:
Objective(s): To validate the Flo-wire and coronary flow reserve in an in vivo	

various hemodynamic conditions.

Technical Approach: Animals will be instrumented and allowed to reach steady state at a paced heart rate of 90 bpm and coronary perfusion pressure of 90 mmhg. Hematocrit and oxygen saturation will be assayed at least once every half-hour to insure stability of the pacemaker. Also, ventricular function will be continuously monitored by the use of segment shortening ultrasound crystals to avoid changes in coronary blood flow due to changes in ventricular function.

Progress: There is no data at present to report. An annual review will be conducted in January 1996.

Date: 15 Nov 95 Protocol Number:	A-95-03 Status: Ongoing	
Title: Effect of Hormone Containing Ha in Guinea Pigs	ir Preparations on Sexual Development	
Start date:	Estimated completion date:	
Principal Investigator: COL Chandra Tiwary, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Pediatrics	Associate Investigator(s): CPT Nick Geraldo, M.D.	
Key Words:	MAJ Kevaghan P. Fair, D.O. - 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: Re	te:	
Objective(s): To observe the effect of containing hair products on the a) sexual c) estrogen, androgen levels of sexually	al development, b) sexual organs, and	
Technical Approach: Estrogen-containing body of animals and signs of estrogenic of serum (blood obtained via cardiac st.	activity will be noted. About 3-4 ml	

Progress: Study has been on hold pending receipt of hairless guinea pigs. Because of the difficulty in obtaining the guinea pigs, a request to change the animal species was presented by the investigator and approved expeditiously by the Institutional Animal Care and Use Committee. The investigator is currently awaiting the procurement of hairless rats in order to begin his study.

hormone analysis.

Date: 15 Nov 95 Proto	ocol Number: A-95-04 Status: Ongoing
Title: Extreme Hemodilution: Function	: Cerebral Electrophysiologic and Metabolic
Start date:	Estimated completion date:
Principal Investigator: MAJ Paul D. Mongan, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Surgery/Anesthesiology & Oper	Associate Investigator(s): rative Svc MAJ John L. Fontana, MC (WRAMC)
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Total number of subjects enro	during reporting period:
Objective (g): To define the	tolerable and intolerable limits of hemodilution

Objective(s): To define the tolerable and intolerable limits of hemodilution in relation to the cerebrovascular, neurophysiologic and cerebral metabolic effects of extreme hemodilution.

Technical Approach: After fasting overnight, swine will be induced with halothane by nose cone titrated to effect. The animals will be endotracheally intubated and ventilated to maintain ${\rm ETCO_2}$ at 35-40 mmhg. Anesthesia will be maintained with halothane. After vascular access is secured, 30 mg/kg of fentanyl, 0.2 mg/kg midazolam, and 0.2 mg/kg of vecuronium will be administered, the halothane will be discontinued and anesthesia will be maintained with fentanyl 0.2 mg/kg/hr and midazolam 0.2 mg/kg/hr.

Progress: Study is on hold awaiting word on application for research grant from US Army Medical Research Materiel Command.

Date: 15 Nov 95	Protocol Number:	A-95-05 Status: Ongoing	
Title: The Effect of Cirrhosis in Male Wist	Iron Depletion witar Rats, <u>Rattus</u> no	th Deferoxamine on CC14 Induced orvegicus.	
Start date: 6 Jul 95		Estimated completion date:	
Principal Investigator MAJ Michael A. Riel, N		Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Gastroenterol	logy Service	Associate Investigator(s): COL Shailesh Kadakia, MC	
Key Words:		LTC William W. Brinkley, VC (ISR)	
Cumulative MEDCASE cos	st:	Estimated cumulative OMA cost:	
Number of subjects enr Total number of subject Periodic review date:	ts enrolled to dat	:e:	
Objective(s): To dete	ermine if iron depl	etion using deferovamine will alter	

Objective(s): To determine if iron depletion using deferoxamine will alter the degree of cirrhosis induced by $CC1_4$.

Technical Approach: Groups I and II will have phenobarbital added to their drinking water for 2 weeks prior to carbon tetrachloride gastric instillation and will occur weekly for 8 to 10 weeks, until ascites develops manifested by bulging flanks. The placement of the carbon tetrachloride in the rats' stomach will be accomplished by placing a tube in the animals stomach through its mouth while it is under general anesthesia.

Progress: This is a new study. There is no reportable data.

		Detail Sur	nmary Sheet		
Date:	1 Dec 95	Protocol Number	: T-92-01	Status:	Terminated
	Sensormedics Swine Model	Model 3100 High Fro	equency Oscil	latory Ventil	ator Training
Start d	ate: 7 Oct 93	L	Estimated o	completion dat	e:
	al Investigato Heiman, LTC, M		Facility: Brooke Army	Medical Cent	er, Texas
_	ent/Service: ent of Pediat:	rics	Associate I	Investigator(s	;):
Key Wor	ds:		1 		
Cumulat	ive MEDCASE co	ost:	 Estimated c	cumulative OMA	cost:
Total n	umber of subje	nrolled during reported to date and the Re-	te:		
other h	ealth care pro	craining protocol is ofessionals the bas cs Model 3100 High	ic knowledge	required to u	ise and
Technic	al Approach:	As outlined in the	training pro	otocol.	

Progress: The training is now being done with human subjects.

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Date:	1 Dec 95	Protocol Numbe	r: T-92-02 Status: Ongoing
Title:	Pediatric End	dotracheal Trainin	g Utilizing the Ferret Model
 Start d	ate: 20 May 92	?	Estimated completion date:
_	al Investigato C. Inscore, I		Facility: Brooke Army Medical Center, Texas
_	ent/Service: ent of Pediatr	rics	Associate Investigator(s):
Key Wor	ds:		
Cumulat	ive MEDCASE co	ost:	Estimated cumulative OMA cost:
Total n	umber of subje	cts enrolled to d	orting period:exicate:eview results:exicate
care pr	oviders the ba	rotocol is design sic knowledge and l intubation in c	ed to teach physicians and other health psychomotor skills required for hildren.

Technical Approach: Protocol designed to increase physician confidence in intubation skills and increase the efficiency with which invasive airway management is accomplished in emergencies.

Progress: 125 students were trained in the PALS course at BAMC during the last twelve months. This training is required at BAMC by JCAHO recommendations. Cost to train these students at a civilian facility would be \$31,250.00 plus per diem.

r: T-93-01 Status: Ongoing
cal Technique
Estimated completion date:
 Facility: Brooke Army Medical Center
Associate Investigator(s):
Estimated cumulative OMA cost:
rting period: te: view results:
s designed to instruct resident icrosurgery required for reproductive

Technical Approach: During their three-month rotation on the Reproductive Endocrinology Service, OB-GYN resident physicians will perform or assist with approximately 10-12 operations in which the operating microscope is used for repair or anastomosis of the fallopian tube.

Progress: 10-12 residents and medical students received instruction in microsurgical technique. This is a vital part of resident training and has direct impact upon their surgical technique in the OR.

Date: 1 Dec 95 Protocol Numb	per: T-93-02 Status: Ongoing
Title: Oral and Maxillofacial Surger Utilizing Rats	ry's Microneurosurgery Laboratory
Start date: Feb 93	Estimated completion date:
Principal Investigator: COL James M. Startzell, DC	Facility: Brooke Army Medical Center
Department/Service: USA DENTAC	Associate Investigator(s): COL John P. McLaughlin, DC
Key Words: Rattus norvegicus, micro- surgery, microneurosurgery, sciatic nerve, nerve repair, neurorrhaphy	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date:	date:

Objective(s): To introduce oral and maxillofacial surgery residents to microneurosurgery and to prepare them for the applications of those skills to human patients. To provide a method for the advancement and maintenance of microneurosurgery skills in previously training oral and maxillofacial surgery staff members.

Technical Approach: Prior to utilizing rats, one to two practical sessions will be conducted at the animal lab site. These sessions will introduce the residents to the operating microscope and loops, to microsurgery instruments and sutures, cloth and plastic materials, rather than animals. Animal phase of training will be scheduled based on the individual's progress in this preanimal clinic.

Progress: The microsurgical technique lab has not been active since February 1994. Due to illness of one of our teaching staff this left only two staff and with no weekend availability of the rat lab, it was impossible to continue the lab and still keep up with clinical business. The rat lab was placed on hold until such time that adequate teaching staff is obtained.

Date: 1 Dec 95 Proto	col Number:	T-93-04	Status: Ongoing
Title: DEPMEDS War Surgery	raining:		
Start date: 2 Oct 93		Estimated co	mpletion date: 20ct93
Principal Investigator: COL Greg Bowman, MC		Facility: Brooke Army	Medical Center
Department/Service: Department of Surgery		Associate In	vestigator(s):
Key Words:			
Cumulative MEDCASE cost:		Estimated cu	mulative OMA cost:
Number of subjects enrolled of Total number of subjects enrolled of Periodic review date:	olled to dat	:e:	
Objective(s): To train personand thoracic war surgery, and environment and equipment.	onnel in: a	a) fundamental e and limitati	principles of abdominal ons of the DEPMEDS
Technical Approach: Animals the DEPMEDS site in approved inhalant anesthesia and life with the assistance of veter dorsal recumbency then sterioperating room nursing person bowel resection with enteroesthoracotomy, and pulmonary reduction/internal fixation	cages and was support will inary person lely prepper anel. Surgenterostomy, esection.	vehicles. Ind Il be provided nnel. Animals I and draped f eons will perf colon resecti Surgeons will	tuction and maintenance by anesthesia personnel will be positioned in or aseptic surgery by form splenectomy, small on with end colostomy, perform open
Progress: The principal investigator (PI) departed the Army. This study has been placed in a hold status until such time that a new PI has been assigned.			

Date: 1 Dec 95	Protocol	Number:	T-94-01	Status:	Ongoing
Title: Cardiology Fel Protocol	low and Ca	ardiovasc	ular Techno	logist Hemod	lynamic Training
Start date: 25 Oct 93			Estimated	completion d	ate:
Principal Investigator Bernard J. Rubal, Ph.D			Facility: Brooke Arm	y Medical Ce	nter, Texas
Department/Service: Cardiology/Medicine			Associate Investigator(s): MAJ William T. Wright, MC		
Key Words:			- Raymond Tamez James R. Bulgrin -		
Cumulative MEDCASE cos	t:		Estimated	cumulative O	MA cost:
Number of subjects enro	ts enrolle	ed to dat	e:		
Periodic review date:		Re	view result	s:	

Objective(s): Training protocol is designed to instruct first year Cardiology Fellows and cardiovascular technologists (cath technicians) in basic hemodynamic principles, concepts in bioinstrumentation, physiologic recording procedures, and endomyocardial biopsy techniques.

Technical Approach: Right and left heart pressures, coronary flow, and thermal dilatation cardiac outputs will be monitored during steady state, ventricular pacing, altered preload and afterload states, and during acute coronary occlusion.

Progress: Three physicians and eight cardiovascular technologist participated in this training protocol. The cardiovascular technologist performed a task done by physicians in the clinical environment. This experience proved to be rewarding allowing them to more fully understand cardiac catheterization procedures and cardiac physiology. Physicians (Cardiology Fellows) benefitted by the improvement of technical skills, particularly in regard to catheter and wire manipulation.

Date: 1 Dec 95 Pr	rotocol Number:	T-94-02	St	atus:	Ongoing
Title: Cardiothoracic scrofa)	Surgery Service	e Porcine	Surgery	Using	Swine (<u>Sus</u>
Start date:		Estim	ated comp	letio	n date:
Principal Investigator COL Greg A. Bowman, MC	:	Facil Brook		dical	Center, Texas
Department/Service: Surgery/ Cardiothoraci	c Surgery	COL D	Associate Investigator(s): COL David Cohen, MC MAJ Mark Nyreen, MC		
Key Words:		q LAM L LAM	Peter Napoli, MC John Carter, SP Ann Johnson, SP		
Cumulative MEDCASE cos	t:	Estim	ated cumu	lativ	e OMA cost:
Number of subjects enrolled during reporting period: Total number of subjects enrolled to date: Periodic review date: Review results:					

Objective(s): 1) Basic proficiency training of surgical housestaff in general cardiothoracic surgical techniques in extracorporeal perfusion techniques. 2) Advanced/refresher proficiency training of staff surgeons and perfusionists in new state-of-the-art or seldom used cardiothoracic surgical techniques or extracorporeal perfusion techniques.

Technical Approach: Training lab will be conducted on an <u>ad hoc</u> basis as determined by the instructor staff. Thoracic Surgery will provide personnel to set up and operate the heart-lung machine. LARF will be given not less than 4 weeks notice that a laboratory session is requested for a specific date and time. One pig shall be used for each laboratory session except in the case of heart transplants. Multiple procedures will be performed on the recipient animal prior to performing the transplant procedure.

Progress: Low dose heparin cardiopulmonary bypass techniques tested and refined.

Date: 1 Dec 95	Protocol Number:	T-94-03	Status: Ongoing	
Title: Basic Genera a Porcine Model	l/Vascular Surgical	Technique	Training Laboratory Using	
Start date:		 Estimated	d completion date:	
Principal Investigat COL Johnny Alvarez,		Facility: Brooke Ar	my Medical Center, Texas	
Department/Service: Surgery/General Surg	ery	Associate Investigator(s): COL Robert Solenberger, MC		
Key Words:		Ralph Wheeler, M.D. David Olson, M.D. Russell Martin, M.D. William Bradshaw, M.D.		
Cumulative MEDCASE c	ost:	Estimated	cumulative OMA cost:	
Number of subjects enrolled during reporting period: Total number of subjects enrolled to date: Periodic review date: Review results:				

Objective(s): 1) Basic proficiency training of surgical concerns, surgical residents, and other select surgical ancillary personnel approved by the principal instructor(s) in general soft tissue and vascular surgical techniques (both laparotomy and laparoscopic procedures. 2) Advanced/refresher proficiency training of staff surgeons in new state-of-theart or seldom used soft tissue and vascular surgical techniques.

Technical Approach: Training laboratory shall be conducted twice monthly (normally the 2nd & 4th Thursday of each month). Each laboratory session shall be scheduled for 1300-1600 hours on the appointed day. One pig shall be used for each laboratory session. At least one instructor shall be present and conduct each training session.

Progress: There is no reportable data at this time.

Date:	1 Dec 95	Protocol	Number:	T-94-04	Status: Ongoing
	Pediatric Adva	nced Life	Support	Skills Laboratory	Using the Goat
Start	date: 1 May 94			 Estimate Complet	ion Date: 1 May 95
	pal Investigator ephen Inscore, N			Facility: Brooke Army Medi	cal Center, Texas
Depart Pediat	ment/Service: rics			Associate Investigator(s): MAJ Mark Hays, MC MAJ Michael Battista, MC	IC .
Key Wo	rds:				
Cumula	tive MEDCASE cos	st:		 Estimated cumula	ative OMA cost:
Total	number of subject	ts enroll	ed to da	rting period: te: eview results:	
Object skills	ive(s): To tead to Pediatric De	ch or refr	esh Pedi resident	atric Advanced Lif s with basic proce	Ee Support (PALS) edural skills in

pediatric resuscitation as required by the American Board of Pediatrics.

Technical Approach: Participants will first receive a one-hour skills-review lecture. Then, during a period of approximately four hours, participants will receive instruction on PALS procedures with live, fully anesthetized animals. Two goats will be used per session with five to six students per goat. One instructor will be present for every 6 students. Under the supervision of the Instructor, the students will perform the following PALS skills: venous cut down, percutaneous arterial line placement, central venous access, intraosseous needle placement, diagnostic peritoneal lavage, needle thoracostomy, tube thoracostomy, Swan-Ganz catheterization (demonstration in one goat, only), needle cricothyroidotomy (after euthanasia) and surgical cricothyroidotomy (after euthanasia).

Progress: Laboratory training was conducted in June and July of 1995 and successful results were achieved.

Date: 15 Nov 95 Protocol Number:	T-94-05 Status: Ongoing
Title: Training of Animal Care Special Techniques for the Care of Military Wor	
Start date:	Estimated completion date:
Principal Investigator: MAJ Larry Carpenter, VC	Facility: Lackland Air Force Base, Texas
Department/Service: 94th Medical Detachment, FSH TX	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to date	te:
Periodic review date: Re	

Objective(s): To allow Animal Care Specialists to gain practical experience in clinical and emergency procedures. Hands-on training in MOS related subjects is needed to provide the necessary practice to achieve proficiency in day-to-day clinical duties as well as training for successful completion of the Self Development Test (SDT).

Technical Approach: Soldier's manual and Trainer's guides will be available to technicians with a description of task and list of specific learning objectives of each task. There will be simulations where the study will be presented with a scenario in which the patient is supposed to have sustained the injury or supposed to be suffering the condition listed. Student will be responsible to taking corrective action as outlined in the reference. This will be similar to the use of moulage casualties in mass casualty exercises.

Progress: An annual review was requested but has not been received. The exact status of this protocol is not known.

Date: 15 Nov 95 Protocol Number	er: T-95-01 Status: Ongoing
Title: Advanced Anesthetic Skills La	aboratory Using a Porcine Model
Start date: 12 Dec 94	Estimated completion date:
Principal Investigator: CPT Samuel C. Sayson, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Surgery/Anesthesiology & Operative Sv	Associate Investigator(s): MAJ Paul D. Mongan, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date:	date:
use of anesthesia equipment designed anesthesia residents in techniques of neurophysiologic monitoring, and chrothe practice of anesthesia.	nic pain management that are germane to be induced and swine will be placed in
femoral cutdown will be performed to femoral artery will be cannulated for femoral vein will be cannulated and c	expose the femoral artery and vein. The monitoring mean arterial pressure. The

Progress: We have had difficulty staffing this protocol and are trying to reorganize so we can continue to train our residents on the use of the field anesthesia machines used in combat.

Date: 16 Oct 95 Proj No: SWOG 7804 Status: Ongoing

Title: Adjuvant Chemotherapy with 5-Fluorouracil, Adriamycin, and Mitomycin-C (FAM) vs Surgery Alone for Patients with Locally Advanced Gastric Adenocarcinoma.

Start Date FY 78	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Gastric adenocarcinoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reportation Number of Subjects Enrolled to Date of Periodic Review 16 Oct 95	te: 5

Objective(s): To determine the efficacy of adjuvant chemotherapy with 5-FU, Adriamycin and Mitomycin-C (FAM) on the disease-free interval and survival of patients with TNM stage-groups IB, IC, II and III gastric adenocarcinoma compared to potentially curative surgery alone.

Technical Approach: Therapy will follow the schema outlined in the protocol

Progress: One patient remains on study. Study is closed for new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 7808 Status: Ongoing				
Title: Combined Modality Treatment for Stages III and IV. Hodgkin's Disease MOPP # 6.				
Start Date FY 79	Est Comp Date:			
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center			
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:			
Key Words: Hodgkin's Disease				
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:			
Number of Subjects Enrolled During Reporting Period: 0				

Objective(s): 1) To attempt to increase the complete remission rate induced with MOP-BAP alone utilizing involved field radiotherapy in patients with Stages III and IV Hodgkin's disease achieving a PR at the end of 6 cycles of MOP-BAP. 2) To determine if immunotherapy maintenance with levamisole or consolidation with low dose involved field radiotherapy will produce significantly longer remission durations over a no further treatment group when CR has been induced with 6 cycles of MOP-BAP in Stages III and IV Hodgkin's disease.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Six patients remain on the study. This study is closed to new patient accrual. However, it will remain open for follow up purposes only.

Date: 16 Oct 95 Proj No: SWOG 7827	Status: Ongoing		
Title: Combined Modality Therapy for E	Breast Carcinoma, Phase III.		
Start Date FY 80	Est Comp Date:		
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center .		
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:		
Key Words: Breast Carcinoma			
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:		
Number of Subjects Enrolled During Reporting Period: 0			

Objective(s): 1) To compare the disease-free interval and recurrence rates in estrogen receptor positive (ER+) premenopausal patients with Stage II disease, using combination chemotherapy alone versus chemotherapy and oophorectomy. 2) To compare the disease-free interval and recurrence rates in estrogen receptor positive postmenopausal patients with Stage II disease, using combination chemotherapy plus tamoxifen versus tamoxifen alone versus combination chemotherapy alone. 3) To compare the disease-free interval and recurrent rates in all estrogen receptor negative (ER-) patients with Stage II disease using one versus two years of combination chemotherapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Thirty-three patients remain on the study. This study is closed to new patient accrual. However, it will remain open for follow up purposes.

Date: 16 Oct 95 Proj No: SWOG 8216/38	Status: Completed	
Title: Comparison of BCG Immunotherapy Bladder Cancer, Phase III.	and Adriamycin for Superficial	
Start Date FY 85	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC	
Key Words: Cancer, Bladder		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Repor Total Number of Subjects Enrolled to Dat Patients Remaining on Study: 0 Date of Periodic Review 16 Oct 95	e: 3	

Objective(s): 1) To compare the effectiveness of intravesical BCG immunotherapy with intravesical adriamycin chemotherapy with respect to disease-free interval and two-year recurrence rate. 2) To compare the toxicity of topical immunotherapy and chemotherapy. 3) To obtain experience regarding disease-free interval and the recurrence rate in patients who develop tumor recurrence and are then crossed over to the alternative treatment arm.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: The study is complete. Data is being analyzed. There are no patients on followup.

Date: 16 Oct 95 Proj No: SWOG 8229/30 Status: Completed

Title: Combined Modality Therapy for Multiple Myeloma, VMCP-VBAP for Remission Induction Therapy: VMCP + Levamisole vs Sequential Half-Body Radiotherapy + Vincristine-Prednisone for Maintenance or Solidation.

Evaluation Phase II

Start Date FY 83	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Myeloma, multiple	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During F Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 18

Objective(s): 1) To compare the effectiveness of two intermittent pulse schedules of the chemotherapy combination of Vincristine, Melphalan, Cyclophosphamide and Prednisone (VMCP) plus Vincristine, BCNU, Adriamycin and Prednisone (VBAP) (alternating versus syncopated) for the induction of remissions in previously untreated patients with multiple myeloma. 2) For patients proven to achieve remission (at least 75% tumor regression after induction), to compare the value of 12 months of chemoimmunotherapy maintenance, VMCP + Levamisole, versus a consolidation program consisting of sequential half-body radiotherapy along with Vincristine and Prednisone followed by unmaintained remission. 3) For patients who only achieve improvement (50%-74% tumor regression) on chemotherapy induction, to determine whether sequential half-body radiotherapy with Vincristine.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is complete. Data is being analyzed. There are no patients on followup.

Date: 16 Oct 95 Proj No: SWOG 8294	Status: Ongoing
Title: Evaluation of Adjuvant Therapy a Negative Operable Female Breast Cancer.	and Biological Parameters in Node
Start Date FY 83	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast Node Negative	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To assess the impact of short-term intensive chemotherapy with CMFP to prevent disease recurrence and prolong survival in N- patients with any size ER- tumor and N- patients with ER+ tumors whose pathological size is greater than or equal to 3 cm. 2) To assess the impact of surgical procedures, ER status, menopausal status and tumor size. 3) To develop guidelines referable to histopathological features of N- tumors which are reproducible and assess their prognostic impact for disease-free survival and survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Nineteen patients remain on the study. This study is closed to new patient accrual, open for follow up purposes only.

Date: 16 Oct 95 Proj No: SWOG 8313	Status: Ongoing
Title: Multiple Drug Adjuvant Chemothe Stage II Carcinoma of Breast, Phase III.	rapy for Patients with ER Negative
Start Date FY 84	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Breast Cancer	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare through a randomized prospective study, the recurrence rates and disease-free intervals (DFI) for postoperative axillary node positive estrogen receptor negative (ER-) breast cancer patients given adjuvant therapy with either short term intense chemotherapy (FAC-M) or one year standard chemotherapy (CMFVP). 2) To compare the effect of these two adjuvant therapies on survival. 3) To compare the relative toxicity of the two therapies.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Three patients remain on the study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8326/27 Status: Ongoing	
Title: Evaluation of Combination Chemo Acute Leukemia and Chronic Granulocytic `	therapy Using High Dose Ara-C in Adult Leukemia in Blastic Crisis, Phase III.
Start Date FY 85	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Leukemia, adult acute Leukemia, chronic granulocytic	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Repor Total Number of Subjects Enrolled to Dat Date of Periodic Review <u>16 Oct 95</u>	e: 4

Objective(s): 1) To compare the effectiveness of three different drug combinations using high dose Ara-C alone or high dose Ara-C in combination with m-AMSA or Mitoxantrone for remission induction in relapsed adult leukemias including both acute non-lymphocytic leukemia, chronic granulocytic during accelerated or blastic phase, as well as untreated secondary acute leukemias. 2) To monitor the side effects of the above combination chemotherapy schedules.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8393	Status: Ongoing
Title: MEL 82 323, National Intergroup Melanoma.	Protocol for Intermediate Thickness
Start Date FY 84	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Melanoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u>	e: 5

Objective(s): 1) To determine the safest excision margins around the primary melanoma. 2) To evaluate the management of the regional lymph nodes (immediate vs delayed lymphadenectomy). 3) To evaluate the relative prognostic value of various histopathological parameters of melanoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Three patients remain on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8507	Status: Ongoing
Title: Maintenance versus no Maintena Bladder Cancer, Phase III.	ance BCG Immunotherapy of Superficial
Start Date FY 86	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Bladder cancer	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 16 Oct 95	ate: 12

Objective(s): 1) To compare the effectiveness of intravesical and percutaneous BCG immunotherapy given on a maintenance versus a no maintenance schedule with respect to disease free interval and rate of tumor recurrence in patients with transitional cell carcinoma of the bladder. 2) To assess the toxicity of maintenance and no maintenance BCG immunotherapy.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Seven patients remain on this study. Study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8509	Status: Ongoing
Title: Evaluation of Menogaril in Aden	ocarcinoma of the Prostate, Phase II.
Start Date FY 86	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Adenocarcinoma, Prostate	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To assess the antitumor activity of Menogaril in patients with advanced adenocarcinoma of the prostate. 2) To define the qualitative toxicities of menogaril administered in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients remain on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8515	Status: Ongoing
Title: Evaluation of Menogaril in Non-	Hodgkin's Lymphoma, Phase II.
Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Non-Hodgkin's, Lymphoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To determine the response rate and response duration for favorable and unfavorable histology Non-Hodgkin's lymphoma (NHL) treated with Menogaril. 2) To define the qualitative and quantitative toxicities of Menogaril administered in a phase II study.

Technical Approach: All patients must have a pathologically verified histologic diagnosis of non-Hodgkin's lymphoma with at least one site of bidimensionally measurable disease. Patients must have failed and recovered from potentially curable treatment. Patients with a cumulative dose of Adriamycin > 250 $\,\mathrm{mg/m^2}$ are not eligible for this study. Allowable prior chemotherapy depends on disease type. Patients will be stratified according to histology: unfavorable histology NHL vs favorable histology NHL. Therapy will follow the schema outlined in the study protocol.

Progress: One patients remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8516	Status: Ongoing
Title: A Phase III Comparison of CHOP vs m-BACOD vs ProMACE-CytaBom vs MACOP-B in Patients with Intermediate or High-Grade Non-Hodgkin's Lymphoma.	
Start Date FY 86	Est Comp Date:
Principal Investigator: Fimothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Non-Hodgkin's lymphoma, high-grade	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare in a randomized Group-wide setting the complete response rate, response duration and survival of patients with intermediate and high-grade non-Hodgkin's lymphoma treated with one of four combination chemotherapy regiments: CHOP, m-BACOD, ProMACE-CytaBOM, or MACOP-B. 2) To compare the toxicities of each regimen in this patient population.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Eight patients remain on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8520	Status: Completed
Title: Cis-Diamminedichloroplatinum II: Treatment of Advanced Epidermoid Carcinor	
Start Date FY 87	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Carcinoma, epidermoid	
Accumulative MEDCASE Cost:	 Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To determine the response rate in patients with advanced epidermoid carcinoma of the penis treated with cis-platinum, methotrexate, and bleomycin. 2) To evaluate the toxicity of this three-drug combination.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8590 Status: Ongoing Phase III Study to Determine the Effect of Combining Chemotherapy With Surgery and Radiotherapy for Resectable Squamous Cell Carcinoma of the Head and Neck. Start Date FY 85 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Squamous cell carcinoma of head and neck

Objective(s): 1) To test whether the addition of chemotherapy to surgery and radiotherapy prolongs disease-free survival and survival between the two study groups. 2) To test whether the addition of chemotherapy to surgery and radiotherapy increases local control rates at the primary site and/or the cervical neck nodes. 3) To determine if the patterns of failure have been changed with the addition of chemotherapy.

16 Oct 95 Results

Number of Subjects Enrolled During Reporting Period:

Total Number of Subjects Enrolled to Date:

Est Accumulative

Continue

OMA Cost:

Accumulative MEDCASE

Date of Periodic Review

Cost:

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8591 Status: Ongoing

Title: NCI Intergroup #0035, An Evaluation of Levamisole Alone or Levamisole plus 5-Fluorouracil as Surgical Adjuvant Treatment for Resectable Adenocarcinoma of the Colon.

Start Date FY 85	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Adenocarcinoma of colon	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 15

Objective(s): To assess the effectiveness of levamisole alone and levamisole plus 5-fluorouracil as surgical adjuvant regimens for resectable colon cancer by comparison with untreated controls.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Six patients remaining on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8598 Status: Ongoing

Title: Prospective Trial for Localized Cancer of the Esophagus: Comparing Radiation as a Single Modality to the Combination of Radiation Therapy and Chemotherapy, Phase III Intergroup.

Start Date FY 87	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, esophagus	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 2

Objective(s): 1) To determine the role of chemotherapy for a potentially curable subset of patients with squamous cell cancer of the esophagus. 2) To determine if the patterns of recurrence for patients treated with the combination of chemotherapy and radiation differs from those patients treated with radiation alone.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8600 Status: Ongoing

Title: A Randomized Investigation of High Dose versus Standard Dose Cytosine Arabinoside With Daunorubicin in Patients With Acute Non-Lymphocytic Leukemia, Phase III.

Start Date FY 87	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Leukemia, acute, non-lymphocytic	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Retotal Number of Subjects Enrolled to Date of Periodic Review 16 Oct 95	Date: 5

Objective(s): 1) To compare among patients with acute non-lymphocytic leukemia, the rate of complete remission produced by induction regimens of either standard dose Cytosine Arabinoside and Daunorubicin or high-dose Cytosine Arabinoside and Daunorubicin. 2) To compare the durations of complete remission and of disease-free survival among patients who each receive one of three combinations of induction and consolidation regimens. 3) To determine the comparative toxicities of these three programs of induction and consolidation.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8621	Status: Ongoing
Title: Chemo-Hormonal Therapy of Postm Cancer, Phase III.	enopausal Receptor-Positive Breast
Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date	e: 1
Date of Periodic Review 16 Oct 95 1	Results Continue

Objective(s): 1) To compare initial combined chemo-hormonal therapy with initial hormonal therapy with respect to survival. 2) To compare initial chemo-hormonal therapy using tamoxifen with that using DES with respect to survival. 3) A secondary goal is to compare combined chemo-hormonal therapy with initial hormonal therapy with respect to response in patients with measurable disease.

Technical Approach: Patients must have clinical or histologic confirmation of recurrent or disseminated breast cancer, with tumor positive for estrogen receptor or progesterone receptor. Patients with completely dissected disease or with a life threatening visceral disease will be ineligible. Therapy will follow the schema outlined in the study protocol.

Progress: One patient remains on study. This study is closed, open for followup purposes only.

Date: 16 Oct 95	Protocol Number:	SWOG 8624	Status:	Ongoing
Title: A Phase III Myeloma	Randomized Trial of	Combination	Therapy for	Multiple
Start date:		Estimated o	completion of	late:
Principal Investiga Timothy J. O'Rourke		Facility: Brooke Army	Medical Ce	enter, Texas
Department/Service: Medicine/Hematology	/Oncology	Associate I	nvestigator	(s):
Key Words:				
Cumulative MEDCASE	cost:	 Estimated c	umulative C	MA cost:
Total number of sub	enrolled during report jects enrolled to date e: <u>16 Oct 95</u> Re	te: <u>3</u>		
Objective(s):	100			
Technical Approach:	Therapy will follow	w the schema	outlined in	the protocol
Progress: The stud purposes only.	y is closed to new pa	atient entry,	open for f	followup

Date: 16 Oct 95 Proj No: SWOG 8692 Status: Completed Therapy in Premenopausal Women with advanced, ER Positive or PgR Positive Breast Cancer: Surgical Oophorectomy vs. the LH-RH Analog, Zoladex: Phase III, Intergroup. Start Date FY 89 Est Comp Date: Principal Investigator: |Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Cancer, Breast Accumulative MEDCASE Est Accumulative Cost: OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: Date of Periodic Review 16 Oct 95 Results Continue

Objective(s): 1) To compare the time to treatment failure and survival of medical castration using Zoladex with surgical castration in premenopausal women with advanced, ER + or PgR + breast cancer. 2) To compare the response rate of the two treatments. 3) To assess the response rate to surgical castration in patients failing to respond to or relapsing on Zoladex, and the response rate to Zoladex in patients failing to respond to or relapsing on surgical castration. 4) To compare toxicities of medical castration and surgical castration. 5) To assess the value of post-treatment hormone levels (LH, FSH and estradiol) in predicting response to medical castration.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Closed to new patient accrual. Open for followup purposes only.

Date: 16 Oct 95 Protocol Number:	SWOG 8697 Status: Ongoing
Title: Phase III Combination Chemothers Insensitive Metastatic Breast Cancer: Regimens of CAF and TSAVBH Induction The Maintenance Therapy with CMF(P)TH or CMI	An Evaluation of CAF vs Rotating erapy Followed by Observation of
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	te: <u>1</u>
Objective(s):	
Technical Approach: Therapy will follow	w the schema outlined in the protocol
Durania - This is a new study Thoro	is no reportable data

Date: 16 Oct 95 Proj No: SWOG 8710	Status: Ongoing
Title: Trial of Cystectomy Alone Versus Patients with Locally Advanced Bladder Ca	
Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Cancer, Advanced Bladder	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u>	9: 2

Objective(s): 1) To compare the survival of those patients with locally advanced bladder cancer treated with cystectomy alone to those treated with M-VAC followed by cystectomy in a randomized Phase III neoadjuvant trial. 2) To quantify the "tumor downstaging" effect of neoadjuvant M-VAC in patients with locally advanced bladder cancer.

Technical Approach: All patients must have histologically proven diagnosis of T_2 - T_{4a} , N_0 , M_0 transitional cell carcinoma of the bladder without mixed histology. All patients must have adequate kidney, liver, and bone marrow function, a performance status of 0-1, and be judged potentially curable. Therapy will follow the schema outlined in the study protocol.

Progress: Study remains ongoing for patient accrual. One new patients was enrolled this year.

Date: 16 Oct 95 Proj No: SWOG 8711	Status: Completed
Title: A Study of Reproductive Function	n in Patients with Testicular Cancer.
Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Cancer, Testicular	· · · · · · · · · · · · · · · · · · ·
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Repor Total Number of Subjects Enrolled to Dat Date of Periodic Review <u>16 Oct 95</u>	e: 1

Objective(s): 1. To evaluate the natural history of semenal fluid and hormonal parameters noted in Stage A testicular cancer patients treated by orchiectomy alone.

- 2. To evaluate the effects of a) orchiectomy plus platinum based combination chemotherapy or radiation therapy and b) retroperitoneal node dissection on the seminal fluid and hormonal parameters of Stage A, B, or C testicular cancer patients.
- 3. To estimate the median time to return to ejaculatory function following orchiectomy and retroperitoneal node dissection.
- 4. To study the effect of testicular cancer on sexual/reproductive functioning.

Technical Approach: Each patient must have histologically proven diagnosis of testis cancer for which he has undergone an orchiectomy. Patients must be registered within three weeks of their surgery. Therapy will follow the schema outlined in the study protocol.

Progress: Study closed to new patient accrual There are no patients on followup.

Date: 16 Oct 95 Proj No: SWOG 8733 Status: Ongoing

Title: Evaluation of Operable Bladder Cancer Patients with Pre-Operative Irradiation + 5-FU Alone, Phase II, a Pilot Study for Patients Ineligible for SWOG-8710.

Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Bladder	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Ro Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 3

Objective(s): 1) Operable Patients: To evaluate the complete downstaging rate in patients with bladder cancer who are treated with pre-operative 5-FU/radiation. to assess the efficacy of treating patients with no histologic evidence of residual tumor following irradiation and 5-FU with additional irradiation and 5-FU without cystectomy. To assess the efficacy of treating patients who are not free of disease after initial treatment with 5-FU/radiation with radical cystectomy. 2) Inoperable Patients: To estimate the response rate of patients treated with 5-FU and radiation. To assess the qualitative and quantitative toxicities of this regimen in the treatment of bladder cancer.

Technical Approach: Patients must have primary or recurrent bladder cancer confined to the pelvis and no evidence of spread beyond the regional lymph nodes at or below the level of the bifurcation of the iliac vessels. Patients with prior inactive malignancies are eligible. Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient accrual.

Date: 16 Oct 95 Proj No: Swod 8736	status: Oligoriig
Title: Treatment of Localized Non-Hodgl Chemotherapy (CHOP) to Chemotherapy plus	
Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	 Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Lymphoma, Non-Hodgkin's	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u>	e: 5

Objective(s): 1) To establish the complete response rate (CR%), CR duration, survival and toxicity of chemotherapy using Cyclophosphamide, Doxorubicin, Vincristine and Prednisone (CHOP) (eight cycles) versus CHOP (three cycles) plus radiation therapy in a cooperative group setting for patients with localized diffuse large cell lymphoma (DLC). 2) To determine if the difference in CR rates of combined treatment (less chemotherapy alone translates into longer survival with less toxicity. 3) To determine if subgroups (based on location, histology, age, stage) have significant prognostic importance with regard to CR%, time to progression, survival and toxicity. 4) To establish CR%, time to progression and survival for localized histologies other than diffuse large cell lymphoma.

Technical Approach: All patients must have biopsy proven Stage I or IE or non-bulky Stage II or IIE non-Hodgkin's lymphoma. Patients must have intermediate or high grade histology other than lymphoblastic lymphoma. No prior chemotherapy or radiation therapy is allowed. Patients with known AIDS syndrome or HIV associated complex are not eligible. Therapy will follow the schema outlined in the study protocol.

Progress: Two patients remain on study. This study remains open for patient accrual.

Date: 16 Oct 95 Proj No: SWOG 8737	Status: Ongoing
Title: Phase III AZQ 24-Hour Infusion Gliomas.	Versus BCNU for Adult High Grade
Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Gliomas, high-grade	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u> B	÷: 5

Objective(s): 1) To compare the activity of 24-hour infusion AZQ versus a BCNU control for adult, high grade, supratentorial gliomas. Primary endpoints for evaluation will be survival and time to progression. Secondary endpoints, when evaluable, will be partial and complete response rates as determined by contrast enhanced CT scan. Identification of a 50% increase in survival over control is sought. 2) To develop a data base on current surgical practices with protocol patients and to study further the prevalence and management of pulmonary toxicity from BCNU.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients remain on study. This study is closed to new patient accrual. Open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8792	Status: Ongoing
Title: Phase III Study of Alfa-nl (Wel Resectable Renal Cell Carcinoma.	lferon ^m) as Adjuvant Treatment for
Start Date FY 87	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Carcinoma, renal cell	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u>	e: 2

Objective(s): To assess in a controlled fashion the effectiveness of interferon alfa-nl (Wellferon tm) as a surgical adjuvant in patients with renal cell carcinoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. Ongoing. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8793 Status: Ongoing

Title: Randomized Phase III Evaluation of Hormonal Therapy versus Observation in Patients with Stage D1 Adenocarcinoma of the Prostate Following Pelvic Lymphadenectomy and Radical Prostatectomy.

Start Date FY 88	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson MAJ, MC
Key Words: Adenocarcinoma, Prostate	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review <u>16 Oct 9</u> 5	Date: 2

Objective(s): 1) To determine the time to progression and survival, in patients with histologically confirmed Stage D1 prostate cancer following prostatectomy and pelvic lymphadenectomy treated immediately with hormonal therapy. 2) Determine whether the effects of early hormone therapy on local control of D1 prostate cancer.

Technical Approach: Patients must have histologically confirmed diagnosis of adenocarcinoma of the prostate (not including "endometroid" carcinoma). Patients must have pathologic D1 disease. Histological confirmation of pelvic node involvement is required for a patient to be considered to have Stage D1 disease. Confirmation must be obtained by formal pelvic node dissection.

Progress: Two patients remain on this study. Ongoing. This study is closed to new patient accrual open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8794	Status: Ongoing
Title: Treatment of Pathologic Stage C Adjuvant Radiotherapy.	Carcinoma of the Prostate with
Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Carcinoma, Prostate	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 2	

Objective(s): 1) To compare in a randomized study, the disease-free survival rates in completely resected patients with pathologic stage C (T3NOMO) carcinoma of the prostate assigned to be treated with adjuvant external beam radiotherapy to that in patients assigned to receive no adjuvant therapy. 2) To assess the qualitative and quantitative toxicities of patients with pathologic stage C (T3NOMO) carcinoma of the prostate when treated with external beam radiotherapy.

Technical Approach: Patients must have undergone radical prostatectomy and pelvic lymphadenectomy with a histologically proved diagnosis of pathologic stage C (T3NOMO) carcinoma of the prostate. Patients must be able to begin treatment within 16 weeks after radical prostatectomy. Therapy will follow the schema outlined in the protocol.

Progress: Twenty-one patients remain on study. Study remains ongoing.

Date: 16 Oct 95 Proj No: SWOG 8795 Status: Ongoing

Title: Randomized Prospective Comparison of Bacillus Calmette-Guerin and Mitomycin-C Therapy and Prophylaxis in Superficial Transitional Cell Carcinoma of the Bladder, with DNA Flow Cytometric Analysis, Phase III.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Carcinoma, Bladder Superficial, Transitional Cell	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): The overall objective of this protocol is to compare the efficacy and toxicity of two commonly used intravesical treatments for recurrent transitional cell carcinoma. The treatments to be evaluated are Mitomycin-C (MMC), and Tice substrain of Bacillus Calmette-Guerin (BCG).

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Four patients remain on study. Ongoing. This study is closed to new patient accrual. Open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8809 Status: Ongoing

Title: A Phase III Study of Alpha Interferon Consolidation Following Intensive Chemotherapy With ProMACE-MOPP (Day 1-8) in Patients With Low Grade Malignant Lymphomas.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Lymphomas, malignant, low grade	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to D Date of Periodic Review 16 Oct 95	ate: 7

Objective(s): 1) To compare the disease-free survival of patients with low grade malignant lymphoma who receive alpha interferon consolidation therapy after intensive induction with chemotherapy ± radiation therapy, to those who receive induction therapy alone. 2) To determine the complete response rate, response duration and survival of low grade lymphoma patients treated with ProMACE-MOPP (Day 1-8). 3) To compare the toxicities of induction and induction plus consolidation therapy in this patient population.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Six patients remain on study. Ongoing for patient accrual and followup purposes.

Date: 16 Oct 95 Proj No: SWOG 8814 Status: Ongoing

Title: Phase III Comparison of Adjuvant Chemoendocrine Therapy with CAF and Concurrent or Delayed Tamoxifen to Tamoxifen Alone in Postmenopausal Patients with Involved Axillary Lymph Nodes and Positive Receptors.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast, Receptor Positive	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 1	

Objective(s): 1) To compare disease-free survival and overall survival of postmenopausal primary breast cancer patients with involved axillary nodes and positive estrogen and/or progesterone receptors treated with standard adjuvant therapy with long-term tamoxifen, or with chemoendocrine therapy with CAF, followed by long-term tamoxifen, or with concurrent chemoendocrine therapy with tamoxifen and CAF. 2) To compare the relative toxicity of the three therapies.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Ten patients remain on the study. Study continues for patient accrual and followup.

Date: 16 Oct 95 Proj No: SWOG 8819	Status: Ongoing	
Title: Central Lymphoma Repository Tissue Procurement Protocol.		
Start Date FY 89	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:	
Key Words: Lymphoma, central Tissue, repository		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0		

Objective(s): 1) To acquire fresh snap-frozen lymphoma tissue to establish a central lymphoma tissue repository. 2) To establish a standard set of procedures for routine acquisition, banking, and study of lymphoma tissues within the cooperative group. 3) To use repository tissue to establish clinical correlations via presently activated phenotyping studies and future projected molecular studies assessing specimen DNA and RNA status.4) To determine if pretreatment phenotype or genotype predict patient outcome with respect to complete response rate, time to progression, and survival using prospective trial designs.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Study continues for data accrual.

Date: 16 Oct 95 Proj No: SWOG 8851 Status: Ongoing

Title: Phase III Comparison of Combination Chemotherapy (CAF) and Chemohormonal Therapy (CAF + Zoladex or CAF + Zoladex + Tamoxifen) in Premenopausal Women with Axillary Node-Positive, Receptor-Positive Breast Cancer --Intergroup.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast, Receptor-Positive	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Rep Total Number of Subjects Enrolled to I Date of Periodic Review 16 Oct 95	Date: 2

Objective(s): 1) To compare the recurrence rates, disease-free intervals (DFI), and hormone-receptor-positive survival for premenopausal women with axillary lymph node-positive breast cancer given adjuvant therapy with chemotherapy (CAF) alone or chemotherapy (CAF) followed by Zoladex (Z) or chemotherapy (CAF) followed by Zoladex plus Tamoxifen (Z + T). We will compare CAF with CAF + Z and CAF + Z with CAF + Z + T. 2) To compare the relative toxicities of these 3 regimens. 3) To assess the effect of CAF, CAF + Z, and CAF + Z + T on hormone levels (LH, FSH, and estradiol) in premenopausal women treated with these adjuvant therapies.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Two patients remain on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8854 Status: Completed

Title: Prognostic Value of Cytometry Measurements of Breast Cancer DNA from Postmenopausal Patients with Involved Nodes and Receptor Positive Tumors: A Companion Protocol to SWOG 8814.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To determine if ploidy analysis of breast cancer by routine clinical flow cytometry (FCM) technique can predict response to therapy and survival of patients registered to SWOG-8814. 2) To determine if ploidy analysis by image processing technique more accurately predicts patient response to therapy and survival than ploidy analysis by FCM.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: There are no patients being followed. Study has been completed.

Date: 16 Oct 95 Proj No: SWOG 8855	Status: Ongoing
Title: A Flow Cytometry Companion Pro Head and Neck Cancer Protocols Utilizin	
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Head and Neck	- -
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s):

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data at this time. Study is ongoing.

Date: 16 Oct 95 Proj No: SWOG 8892	Status: Ongoing
Title: A Study of Radiotherapy With or Patients with Nasopharyngeal Cancer, Pha	
Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: . Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Nasopharyngeal	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u>	e: 1

Objective(s): 1) To compare the complete response rate, time to treatment failure, overall survival and pattern of recurrence. 2) To assess the qualitative and quantitative toxicities.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: One patient remains on study. Study is ongoing.

Date: 16 Oct 95 Proj No: SWOG 8894 Status: Ongoing A Comparison of Bilateral Orchiectomy with or without Flutamide for the Treatment of Patients with Histologically Confirmed Stage $\mathrm{D}_{\!2}$ Prostate Start Date FY 90 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Ian M. Thompson, MAJ, MC Key Words: Cancer, prostate Accumulative MEDCASE Est Accumulative Cost: OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: Date of Periodic Review 16 Oct 95 Results Continue

Objective(s): To compare bilateral orchiectomy + flutamide versus bilateral orchiectomy alone according to: 1) Survival, 2) Progression free survival, 3) Qualitative and quantitative toxicities.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Sixteen patients remain on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8895	Status: Completed
Title: Phase III Study of the role of (Treatment of Dysphagia following Major He	
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Head and Neck	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) The objective of this study is to test the concept that cricopharyngeal myotomy performed in conjunction with the resection of a tumor involving the base of tongue or supraglottic larynx or hypopharynx will increase the frequency of patients with normal swallowing function at six months.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients being followed. Study has been completed.

Date: 16 Oct 95 Proj No: SWOG 8897 Status: Ongoing

Title: Phase III Comparison of Adjuvant Chemotherapy with or without Endocrine Therapy in High-Risk, Node Negative Breast Cancer Patients, and a Natural History Follow-up Study in Low-Risk, Node Negative Patients (Intergroup).

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Breast, Node Negative	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Retotal Number of Subjects Enrolled to Date of Periodic Review 16 Oct 95	Date: 34

Objective(s): 1) To compare disease-free survival (DFS) and overall survival(s) of high risk primary breast cancer patients with negative axillary lymph nodes treated with standard adjuvant chemotherapy with CMF for six cycles or with chemotherapy using CAF for six cycles. 2) To assess the value of the addition of tamoxifen for five years compared to no tamoxifen in these patients. 3) To compare the relative toxicity of the therapies. 4) To assess the prognostic significance of DNA flow cytometry in patients with small, occult invasive breast cancer treated by local therapy only. 5) To evaluate the disease free survival and survival of low risk invasive breast cancer determined by receptor status, tumor size and % of S phase treated by local therapy only.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Thirty-two patients remaining on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8899 Status: Ongoing

Title: A Prospectively Randomized Trial of Low-Dose Leucovorin Plus 5-FU, High-Dose Leucovorin Plus 5-FU, or Low-Dose Leucovorin Plus 5-FU Plus Levamisole Following Curative Resection in Selected Patients with Duke's B or C Colon Cancer.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, Colon, Duke's B/C	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To independently assess the effectiveness of 5-FU + low-dose Leucovorin, 5-FU + high dose Leucovorin 5-FU + Levamisole and 5-FU + low-dose Leucovorin + Levamisole as surgical adjuvant therapy for resectable colon cancer

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Thirteen patients remaining on study. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8917	Status: Ongoing
Title: 5-Fluorouracil, Leucovorin and Cancer, Phase II Pilot.	Roferon-A in Advanced Colorectal
Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Cancer, colorectal	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate the likelihood of response in order to assess whether this regimen should be advanced to further study. 2) To evaluate the qualitative and quantitative toxicities of this regimen.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. Ongoing. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8925 Status: Ongoing

Title: Evaluations of Cisplatin + VP-16 Followed by Mitotane at Progression if No Prior Mitotane or Cisplatin + BP-16 Only if Prior Treatment with Mitotane in Advanced and Metastatic Adrenal Cortical Carcinoma.

Start Date FY 89	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Carcinoma, Metastatic Adrenal Cortical	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate the response and response duration of patients with:

- adrenocortical carcinoma treated with combination chemotherapy consisting of cisplatin and etoposide, and
- of those who receive mitotane after progression on the above chemotherapy (if no prior treatment with mitotane). 2) To evaluate the qualitative and quantitative toxicities of these therapies. 3) To evaluate and compare tumor morphology of patients with this rare tumor.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Study remains ongoing for patient accrual.

Date: 16 Oct 95 Proj No: SWOG 8931 Status: Ongoing

Title: Phase III Comparison of Cyclophosphamide, Doxorubicin, and 5-

Fluorouracil (CAF) and a 16-Week Multi-Drug Regimen as Adjuvant Therapy for Patients with Hormone Receptor Negative, Node-Positive Breast Cancer.

Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Breast, cancer	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Retotal Number of Subjects Enrolled to Date of Periodic Review 16 Oct 95	Date: 3

Objective(s): 1) To compare disease-free and overall survival in node positive receptor negative breast cancer patients receiving adjuvant CAF or a 16 week multi-drug chemotherapy regimen. 2) To compare toxicities of adjuvant CAF and a 16 week multi-drug regimen.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients remain on study. Ongoing. This study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Proj No: SWOG 8942 Status: Completed

Title: High Dose Etoposide, Cyclophosphamide and Either Fractionated Total Body Irradiation or Carmustine Combined with Autologous Bone Marrow Rescue for Refractory or Relapsed Non-Hodgkin's Lymphoma.

Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Lymphoma, non-hodgkin's	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During R Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 2

Objective(s): 1) To evaluate in a group-wide setting the complete response rate and survival of patients with either "sensitive" or "resistant" relapsed or refractory Non-Hodgkin's lymphoma treated with high dose VP-16, cyclophosphamide, and fractionated total body irradiation or VP-16, cyclophosphamide and BCNU (for patients receiving any prior mediastinal RT) combined with an autologous bone marrow transplant. 2) To assess the non-hematopoietic toxicities of these regimens.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients being followed. Study has been completed.

Date: 16 Oct 95 Proj No: SWOG 8947	Status: Ongoing
Title: Central Lymphoma Serum Reposito	ry Protocol.
Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Lymphoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To establish a central lymphoma serum repository that will serve as a resource to provide specimens for current and future scientific studies. 2) To utilize the Southwest Oncology Group clinical database to perform clinicopathologic correlations with the results of those studies.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study ongoing for data accrual.

Date: 16 Oct 95 Proj No: SWOG 8949	Status: Ongoing
Title: A Randomized Comparison of Neph Intron-A Alone in Patients with Advanced	
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Carcinoma, Advanced Renal Cell	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate and compare the survival and response rates of patients with metastatic renal cell carcinoma receiving nephrectomy followed by Interferon Alpha-2b (Intron-A) vs. Interferon Alpha-2b (Intron-A) alone.

2) To evaluate morbidity and mortality associated with adjuvant nephrectomy in metastatic renal cell carcinoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on the study. Study ongoing. No reportable data is available at this time.

Date: 16 Oct 95 Proj No: SWOG 8952	Status: Ongoing
Title: Treatment of Advanced Hodgkin's Study Comparing ABVD vs MOPP/ABV Hybrid.	Disease - A Randomized Phase III
Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Advanced Hodgkin's	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare ABVD to the MOPP/ABV hybrid as therapy for patients with advanced Hodgkin's disease in terms of complete response rates, disease-free survival, failure-free survival and both immediate and long-term toxicities. 2) To compare the rate of drug delivery of the anti-neoplastic agents, especially the comparative dose rate of ABV in the two treatment groups. 3) To examine the prognostic importance of time to response, performance status, age, presence of bulky disease, C-reactive protein, erythrocyte sedimentation rate, and prior radiotherapy on survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Three patients remain on study. Study ongoing. No reportable data at this time.

Date: 16 Oct 95 Proj No: SWOG 8954	Status: Ongoing	
Title: Evaluation of the L-17M Protocol in the Management of Patients with Lymphoblastic Lymphoma, Phase II, Pilot.		
Start Date FY 90	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	 Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:	
Key Words: Lymphoma		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0		

Objective(s): 1) To assess the response rate and response duration of lymphoblastic lymphoma treated with the L-17M protocol. 2) To assess the qualitative and quantitative toxicities of the L-17M protocol administered in a Phase II study. 3) To assess the immunophenotypic characteristics of adult lymphoblastic lymphoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study ongoing. Study remains open for data accrual.

Date: 16 Oct 95 Proj No: SWOG 8990 Status: Ongoing

Title: Combined Modality Treatment for Resectable Metastatic Colorectal Carcinoma to the Liver: Surgical Resection of Hepatic Metastases in Combination with Continuous Infusion of Chemotherapy.

Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Carcinoma, Colorectal Metastatic to liver	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	Date: 0

Objective(s): 1) To study the incidence of recurrence and time to recurrence in patients with 1-3 hepatic metastases treated with resection alone versus resection and continuous infusion of 5-FU into the systemic venous system and FUDR into the hepatic artery.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There is no reportable data available at this time.

Date: 16 Oct 95 Proj No: SWOG 8993	Status: Ongoing
Title: Phase II Study of High Dose Melg Support and GM-CSF in Refractory Multiple	
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Myeloma, Multiple	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 2 Total Number of Subjects Enrolled to Date: 3 Date of Periodic Review 16 Oct 95 Results Continue	

Objective(s): 1) To evaluate therapeutic efficacy and toxicity of high dose melphalan (HDM 200mg/M^2) in patients with multiple myeloma (MM) resistant to VAD and alkylating agents followed by autologous hemopoietic stem cell support (marrow and/or blood) and GM-CSF administration. 2) To assess the feasibility of measuring multi-drug resistance in this group of patients. 3) To determine the feasibility of conducting such high dose therapy in a multi-institutional setting such as SWOG as a prelude to future trials for patients earlier in the disease course.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients were enrolled during this reporting period. Study remains ongoing for patient enrollment.

Date: 16 Oct 95 Proj No: SWOG 8994	Status: Ongoing
Title: Evaluation of Quality of Life is of the Prostate Enrolled on SWOG 8794.	n Patients with Stage C Adenocarcinoma
Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson, MAJ, MC
Key Words: Prostate, adenocarcinoma	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 2	
Total Number of Subjects Enrolled to Date: 16	
Date of Periodic Review <u>16 Oct 95</u>	Results Continue

Objective(s): 1) To compare these primary aspects of quality of life, according to treatment assignment: 1.11) Treatment specific symptoms; 1.12) Physical functioning; 1.13) Emotional functioning.

- 2) To compare three secondary quality of life variables, according to treatment assignment: 1.21) General symptoms; 1.22) Global perception of quality of life; 1.23) Social functioning.
- 3) The comparison of quality of life measurements between treatment arms will complement the analysis of survival data for patients registered to SWOG-8794 and become a critical consideration if no difference is demonstrated in survival between the treatment arms.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Fourteen patients remain on study. Study remains open for patient accrual.

Date: 16 Oct 95 Proj No: SWOG 9000	Status: Completed
Title: Biomarkers of Colorectal Cancer	Prognosis.
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Colorectal Cancer	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate if aneuploidy in Dukes B or C colon cancers as determined by flow cytometric analysis of DNA content has independent prognostic significance for survival or disease free survival in patients enrolled on SWOG-8591. 2) To evaluate if aneuploidy in colon cancers is predictive of patients who benefitted from adjuvant therapy with levamisole or 5-FU plus levamisole by increased survival or disease free survival in SWOG-8591.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients on followup. Study is completed.

Date: 16 Oct 95 Proj No: SWOG 9003	Objective County	
	Status: Ongoing	
Title: Fludarabine for Waldenstrom's Macroglobulinemia (WM): A Phase II Pilot Study for Untreated and Previously Treated Patients		
Start Date	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:	
Key Words:		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0		

Objective(s): 1) To estimate response rates and survival in patients with Waldenstrom's Macroglobulinemia (WM) receiving fludarabine, with stratification according to whether they have had prior therapy. 2) To define prognostic factors that may relate to response, time to progression and overall survival, separately for newly diagnosed and previously treated patients. 3) To estimate the associated hematologic and non-hematologic toxicities.

Technical Approach: As outlined in the protocol schema.

Progress: One patient remains on study. There is no reportable data.

Date: 16 Oct 95 Proj No: SWOG 9005	Status: Ongoing	
Title: Double Blind Randomized Trial of the Anti-Progestational Agent Mifepristone in the Treatment of Unresectable Meningioma, Phase III		
Start Date	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:	
Key Words:		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0 Total Number of Subjects Enrolled to Date: 1 Date of Periodic Review 16 Oct 95 Results Continue		

Objective(s): 1) To compare daily oral mifepristone vs placebo with respect to time to treatment failure in patients with unresectable meningioma. 2) To further evaluate the tolerance of long term oral mifepristone.

Technical Approach: As outlined in the protocol schema.

Progress: There are no patients on followup and there is no reportable data. Study remains ongoing for data accrual.

Date: 16 Oct 95 Proj No: SWOG 9007	Status: Ongoing
Title: Cytogenetic Studies in Leukemia	Patients, Ancillary.
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Leukemia	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 1 Total Number of Subjects Enrolled to Date: 5 Date of Periodic Review 16 Oct 95 Results Continue	

Objective(s): 1) To estimate the frequencies and prognostic significance of cytogenetic abnormalities in marrow or blood cells of leukemia patients prior to treatment on Southwest Oncology Group protocols and at various times in the course of their treatment. 2) To estimate correlations between the presence of cytogenetic features and of clinical, pathophysiological, cellular, or molecular characteristics in these patients. 3) To provide quality control for all Southwest Oncology Group cytogenetic data.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients being followed and there is no reportable data available at this time. Study remains open for data accrual.

Proj No: SWOG 9008 Status: Ongoing Date: 16 Oct 95 Trial of Adjuvant Chemoirradiation After Gastric Resection for Title: Adenocarcinoma. Start Date FY 91 Est Comp Date: Principal Investigator: |Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Associate Investigators: Dept/Svc: Department of Medicine/Oncology Key Words: Adenocarcinoma, Gastric Accumulative MEDCASE Est Accumulative OMA Cost: Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: 16 Oct 95 Results Continue. Date of Periodic Review

Objective(s): 1) A comparison of overall and disease free survival between patients being treated with surgical resection only and those being treated with surgery plus adjuvant therapy. 2) A comparison of incidence and patterns of disease failure between surgery and surgery plus adjuvant therapy treated patients. 3) An assessment of patient tolerance of upper abdominal chemoirradiation after gastric resection.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients remain on this study. There is no reportable data available at this time.

Date: 16 Oct 95 Proj No: SWOG 9011 Status: Ongoing

Title: High Dose Etoposide, Cyclophosphamide, and Either Fractionated Total Body Irradiation or Carmustine Combined with Autologous Bone Marrow Rescue for Refractory or Relapsed Hodgkin's Disease.

Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Bone marrow transplant, hodgkins disease	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate in a group-wide setting the complete response rate and survival of patients with either "sensitive" or "resistant" relapsed or refractory Hodgkin's disease treated with high dose VP-16, cyclophosphamide, and fractionated total body irradiation or VP-16, cyclophosphamide and BCNU (for patients receiving any prior mediastinal RT) combined with an autologous bone marrow transplant.

2) To assess the non-hematopoietic toxicities of these regimens in this patient population.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on this study. Study remains ongoing.

Date: 16 Oct 95 Proj No: SWOG 9013 Status: Ongoing

Title: A Prospective Randomized Comparison of Combined Modality Therapy for Squamous Carcinoma of the Esophagus: Chemotherapy Plus Surgery vs Surgery alone for Patients with Local Regional Disease, Phase III-Intergroup.

Start Date FY 90	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Squamous carcinoma, esophagus	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	

Objective(s): 1) To compare, using a prospective controlled randomized study design, the outcomes of therapy of surgery alone, vs pre- and post- operative chemotherapy and surgery for patients with local regional esophageal cancer. Outcome is defined as survival and relapse pattern. 2) To assess the toxicities of a multimodality approach to esophageal carcinoma involving systemic chemotherapy and surgery. The toxicities of surgical resection, as initial therapy or following chemotherapy will be assessed as operative morbidity and mortality. 3) To compare the local and distant control rates with the two approaches and to define the pattern of failure. 4) To compare the impact on overall and disease free survival of multimodality therapy with surgery alone.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Three patients remain on study. There is no reportable data available at this time.

Date: 16 Oct 95 Proj No: SWOG 9019 Status: Ongoing

Title: A Phase III, Randomized, Prospective Comparison Between Chemotherapy Plus Radiotherapy Together with Surgery for Selected Stage IIIa (Positive Mediastinal Nodes) and Selected Stage IIIb (No Malignant Effusion) Non-Small Cell Lung Cancer.

Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Re Total Number of Subjects Enrolled to Date of Periodic Review 16 Oct 9	

Objective(s): 1) Assess whether concurrent chemotherapy and radiotherapy followed by surgical resection results in a significant improvement in progression-free, overall, and long-term survival compared to the same chemotherapy plus standard radiotherapy alone for patients with stage IIIa (N2-positive) and selected IIIb non-small cell lung cancer. 2) Evaluate the patterns of local and distant failure for patients enrolled in each arm of the study, in order to assess the impact of the therapy on local control and distant metastases.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study remains ongoing. One patient remains on this study.

Date: 16 Oct 95 Proj No: SWOG 9021	Status: Completed
Title: Post-Operative Radiotherapy for	Single Brain Metastases, Phase II.
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Metastases	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate the effectiveness of whole brain radiation therapy given after complete resection of single brain metastasis from systemic cancer. 2) To compare complete surgical resection plus postoperative whole brain radiation therapy to complete resection alone, with respect to survival, site of recurrence, cause of death, and quality of life.

3) To evaluate the use of Quality of Life Questionnaire specific for CNS malignancies.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients on this study at this time. Study has been completed.

Date: 16 Oct 95 Protocol Number:	SWOG 9023 Status: Ongoing
Title: Cytogenetic and Flow Cytometric Carcinoma: A Companion Study to SWOG-89	Analysis of Solid Tumors: Renal Cell 949
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	ce: <u>0</u>
Objective(s):	
Technical Approach: Therapy will follow protocol.	wed the schema outlined in the

Progress: Study is still ongoing and open for patient accrual.

Status: Ongoing	
Title: A Pilot Study of Combined Modality Therapy in T3, 4; No, Mo Adenocarcinoma of the Prostate, Phase II.	
Est Comp Date:	
Facility: Brooke Army Medical Center	
Associate Investigators: Ian M. Thompson, MAJ, MC	
Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0 Total Number of Subjects Enrolled to Date: 8 Date of Periodic Review 16 Oct 95 Results Continue	

Objective(s): 1) To evaluate the likelihood of complete response of T3, T4; No Mo prostate cancer to prolonged venous infusion of 5-fluorouracil in combination with external beam radiation therapy. 2) To evaluate the safety and toxicity of pelvic irradiation in combination with prolonged venous infusion of 5-fluorouracil at a dose of 200mg/m2/day.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Eight patients remain on this study. Study remains ongoing for further patient enrollment.

Date: 16 Oct 95 Proj No: SWOG 9028 Status: Completed

Title: A Phase III Randomized Trial of Combination Therapy for Multiple Myeloma Comparison of (1) VAD to VAD/Verapamil/Quinine for Induction with Crossover to VAD/Verapamil/Quinine for VAD Induction Failures; (2) Alpha-2B Interferon or Alpha-2B Interferon Plus Prednisone for Remission Maintenance.

Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Myeloma, Multiple	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare the effectiveness of the VAD chemotherapy regimen when administered alone or in combination with chemosensitizers (verapmil/quinine) intended to block the emergence of multidrug resistance during remission induction in previously untreated patients with multiple myeloma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients enrolled on study. Study has been completed and data accrual achieved.

Date: 16 Oct 95 Proj No: SWOG 9031 Status: Ongoing

Title: A Double Blind Placebo Controlled Trial of Daunomycin and Cytosine Arabinoside With or Without rhg-CSF in Elderly Patients With Acute Myeloid Leukemia, Phase III.

Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Acute myeloid Leukemia
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare the complete response rates and durations of survival in patients aged 56 or older with acute myeloid leukemia (AML) when treated with standard doses of Cytosine Arabinoside (Ara-C) and Daunorubicin (DNR), with or without recombinant human granulocyte-colony stimulating factor (rhg-CSF). 2) To assess the frequency and severity of toxicities of the two treatment regimens. 3) To compare the duration of neutropenia and thrombocytopenia; the total of febrile days; the number of days of antibiotic therapy; the number and type of infection episodes; and the number of hospital days in patients treated with or without recombinant human granulocyte-colony stimulating factor (rhg-CSF). 4) To correlate biological parameters including cell surface immunophenotype, ploidy and cytogenetics with clinical response.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on this study. Study continues with patient followup.

Date: 16 Oct 95 Proj No: SWOG 9032	Status: Ongoing
Title: A Controlled Trial of Cyclosporine As a Chemotherapy-Resistance Modifier In Blast Phase-Chronic Myelogenous Leukemia, Phase III.	
Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: cyclosporine, Chemotherapy-Modifier
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare the duration of survival in patients with chronic myelogenous leukemia (CML) in blast phase, when treated with either chemotherapy (Ara-c/Daunomycin) alone, or chemotherapy plus the resistance modifier cyclosporine-A (CyA). 2) To estimate the frequency of P-glycoprotein expression and its association with blast lineage and prognosis. 3) To compare the frequency and severity of toxicity of the two treatment regimens.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is ongoing. There is no reportable data.

Date: 16 Oct 95 Protocol Number	: SWOG 9034 Status: Completed
Title: Phase III Study of Three Intens Acute Non-Lymphocytic Leukemia: compa: Transplantation, Intensive Chemotherapy Transplantation	rison of Autologous bone Marrow
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: 16 Oct 95	ate: <u>0</u>
Objective(s):	
Technical Approach: Therapy will folloprotocol.	ow the treatment schema outlined in the
Progress: Study is closed. There were	e no patients enrolled.

Date: 16 Oct 95 Proj No: SWOG 9035 Status: Ongoing

Title: Randomized Trial of Adjuvant Immunotherapy with an Allogenic Melanoma Vaccine for Patients with Intermediate Thickness Node, Negative Malignant Melanoma (T3NOMO) Phase III.

Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Allogenic Melanoma Vaccine
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare disease-free survival and overall survival between patients with T3N0MO malignant melanoma who receive adjuvant immunotherapy with an allogeneic melanoma vaccine versus no adjuvant treatment. 2) To evaluate the toxicity of adjuvant immunotherapy with an allogeneic melanoma vaccine in patients with T3N0MO malignant melanoma.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients currently enrolled on study. There is no reportable data available.

Status: Completed
Etoposide and Cyclophosphamide for Lung Cancer Phase II Pilot.
Est Comp Date:
Facility: Brooke Army Medical Center
Associate Investigators:

Est Accumulative OMA Cost:
ting Period: 0e: 4Results Completed

Objective(s): 1) To estimate the response rate of extended oral administration of etoposide and cyclophosphamide in advanced non-small cell lung cancer. 2) To evaluate the qualitative toxicities of this regimen administered in a Phase II study.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is completed. There are no patients remaining on study for followup.

Date: 16 Oct 95 Proj No: SWOG 9039 Status: Completed Evaluation of Quality of Life in Patients with Stage D2 Cancer of the Title: Prostate Enrolled on SWOG-8894. Start Date FY 91 Est Comp Date: Principal Investigator: Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology | Ian M. Thompson, MAJ, MC Key Words: Cancer, Prostate Accumulative MEDCASE Est Accumulative Cost: OMA Cost: Number of Subjects Enrolled During Reporting Period: 0 Total Number of Subjects Enrolled to Date: Date of Periodic Review 16 Oct 95 Results Completed

Objective(s): The Cancer Control intervention study measures quality of life in patients with advanced carcinoma of the prostate. Specifically, it is a companion protocol for SWOG-8894. Treatment of Stage D2 Carcinoma of the Prostate Comparing Orchiectomy +/- Flutimide.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients on followup. Study is complete.

Date: 16 Oct 95 Proj No: SWOG 9040	Status: Ongoing
Title: Intergroup Rectal Adjuvant Prot	ocol, A Phase III Study.
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Carcinoma, Rectal	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): The objective of the proposed study is to determine the relative efficacy of: 5-FU, 5-FU and leucovorin, 5-FU and levamisole and 5-FU, leucovorin and levamisole when combined with pelvic radiation therapy in the treatment of Stages B-2 and C rectal cancer.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on this study. Study is closed to new patient accrual, open for followup purposes only.

Date: 16 Oct 95 Protocol Number:	SWOG 9041 Status: Ongoing
Title: Chemoprevention of Recurrent Ad Carcinoma. A Phase III Pilot Study.	enomas and Second Primary Colorectal
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 Review results:	

Objective(s): 1) To investigate the ability of the Southwest Oncology Group to enroll sufficient numbers of patients with early stages of CRC with the intent of preventing subsequent adenomas or new primary carcinomas. New investigators, such as gastroenterologists and surgeons who treat these early malignancies, will be identified, who can participate and are willing to enroll patients in this study. 2) To monitor compliance in pill intake (the dose taken), the drop-out rate and the completion rate of yearly surveillance colonoscopy. 3) To monitor toxicities of calcium supplementation.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients on study. Status remains ongoing for patient accrual.

Date: 16 Oct 95	Protocol Number:	SWOG 9043 Status: Completed
	Randomized Trial of Be in Stages I and II Hea	ta Carotene vs Placebo in Prevention of and Neck Cancer.
Start date:		Estimated completion date:
Principal Invest Timothy J. O'Rou	_	Facility: Brooke Army Medical Center, Texas
Department/Servi Medicine/Hematol		Associate Investigator(s):
Key Words:		
Cumulative MEDCA	SE cost:	Estimated cumulative OMA cost:
Total number of	subjects enrolled to da	rting period: 0
Objective(s):		
Technical Approa	ch: Therapy will follo	w the schema outlined in the protocol.
Progress: There	are no patients enroll	ed in this study.

Date: 16 Oct 95 Proj No: SWOG 9058	Status: Completed
Title: A Phase II Trial of Intravenous Untreated Extensive Small Cell Lung Card	
Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Vinorelbine, Lung Carcinoma
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Dat Date of Periodic Review <u>16 Oct 95</u>	:e: 0

Objective(s): 1) To assess whether vinorelbine (Navelbine) given as a weekly intravenous infusion produces objective clinical responses in patients with previously untreated extensive small cell lung cancer. 2) To assess the clinical and laboratory toxicities as well as patient tolerance of this dose/schedule of intravenous vinorelbine (Navelbine).

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients enrolled on study or on followup. Study is completed.

Date: 16 Oct 95 Protocol Number	r: SWOG 9059 Status: Ongoing
Title: Phase III Comparison of Standard Radiotherapy, versus Radiotherapy plus Simultaneous Cisplatin, Versus Split Course Radiotherapy plus Simultaneous Cisplatin and 5-Fluorouracil, in Patients with Unresectable Squamous Cell Carcinoma of the Head and Neck.	
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 1 Periodic review date: 16 Oct 95 Review results: Ongoing	
Objective(s):	

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. This is a new study. There is no reportable data. Study is ongoing.

Date: 16 Oct 95 Proj No: SWOG 9061 Status: Ongoing

Title: A Phase III Study of Conventional Adjuvant Chemotherapy Versus High Dose Chemotherapy and Autologous Bone Marrow Transplantation Versus Adjuvant Intensification Therapy Following Conventional Adjuvant Chemotherapy in patients with Stage II and III Breast Cancer at High Risk of Recurrence.

Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Breast Cancer	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 2	

Objective(s): 1) To compare the sites and rates of recurrence, disease-free survival and overall survival, and toxicity of adjuvant chemotherapy (CAF) with adjuvant chemotherapy plus high-dose therapy with cyclophosphamide and ThioTEPA with autologous marrow infusion in patients with breast cancer with 10 or more positive lymph nodes. 2) To compare the efficacy and toxicity of 3 different infusion schedules of GM-CSF. 3) To prospectively evaluate the incidence and degree of occult marrow contamination due to breast cancer cells at the time of study entry and following CAF chemotherapy by analyzing samples of marrow using a panel of monoclonal antibodies specific for breast cancer.

4) To document the changes in psychosocial function that occur during treatment on the two regimens and to compare post-treatment recovery of psychosocial function.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Three patients are enrolled on study. Study is ongoing.

Date: 16 Oct 95 Protocol Numb	er: SWOG 9106 Status: Ongoing
Title: Evaluation of Two High Dose Che Marrow Support for Selected Patients wi	motherapy Regimens with Autologous Bone th Advanced Ovarian Cancer, Phase II
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: <u>16 Oct 95</u>	te: <u>0</u>
Objective(s):	
Toghnigal Approach: Therapy will follo	w the schema outlined in the protocol.

Technical Approach: Therapy will follow the schema outlined in the protocol

Progress: One adverse event was reported in August 1994. Otherwise, there is no reportable data. Study remains ongoing for patient accrual.

Date: 16 Oct 95 Proj No: SWOG 9108	Obobine O
Title: A Phase III Comparison of Fludarabine Phosphate vs Chlorambucil vs Fludarabine Phosphate + Chlorambucil in Previously Untreated B-Cell Chronic Lymphocytic Leukemia.	
Start Date FY 91	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Leukemia, Chronic Lymphocytic	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To compare in previously untreated CLL patients the response rates and progression free survival. 2) To determine whether the quality of life is superior using any of the three regimens. 3) To determine whether Fludarabine Phosphate and chlorambucil are non-cross-resistant by a crossover design for patients failing to respond to the single agent to which they were initially randomized.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is completed. There are no patients remaining on study.

Date: 16 Oct 95 Protocol Number:	SWOG 9109 Status: Ongoing
Title: Neoadjuvant Zoladex and Flutamide in Bulky and Non-Bulky Clinical Stage C Carcinoma of the Prostate, Phase II	
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reporting period:	

Objective(s):

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are four patients remaining on study. Study remains ongoing for patient and data accrual.

Date: 16 Oct 95 Proj No: SWOG 9110	Status: Completed	
Title: A Phase II Evaluation of Didemnin B In Central Nervous System Tumors.		
Start Date FY 92	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC; MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Central Nervous Tumors, Didemnin B	
Key Words:		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0		

Objective(s): 1) evaluate the likelihood of response in order to assess whether didemnin B should be advanced to further studies and, 2) evaluate the qualitative and quantitative toxicities of didemnin B.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is completed. There are no patients currently on followup.

Title: Phase III Study of Post-Operative Adjuvant Interferon Alpha 2 in Resected High-Risk Primary and Regionally Metastatic Melanoma.		
Est Comp Date:		
Facility: Brooke Army Medical Center		
Associate Investigators:		
Est Accumulative OMA Cost:		
Number of Subjects Enrolled During Reporting Period: 1		
1		

Objective(s): 1) To establish the efficacy of 1 year at maximally tolerable dosages (IV and SC) interferon alfa-2b as an adjuvant to increase the disease free interval and overall survival in patients at high risk for recurrence after definitive surgery for deep primary lesions or after regional lymph node recurrence. 2) To evaluate the efficacy and tolerance of long-term Interferon alfa-2b at 3 MU/d (SC TIW) as an adjuvant to increase the diseasefree survival and overall survival of patients at high risk for recurrence after definitive surgery for deep primary lesions or after regional lymph node recurrence with melanoma, in comparison to 1 year of treatment of maximally tolerable dosages.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is ongoing. Currently there is one patient enrolled on study.

Date: 16 Oct 95 Proj No: SWOG 9119	Status: Ongoing
Title: Primary Chemotherapy of Poor Pr Pilot.	ognosis Soft Tissue Sarcomas Phase II,
Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Soft Tissue Sarcomas	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reporting Period: 0	

Objective(s): 1) To evaluate the efficacy of primary chemotherapy, wide surgical resection, adjuvant chemotherapy and radiotherapy on local control, metastasis free survival and overall survival. 2) To evaluate the utility of tumor response to primary chemotherapy as an indicator of local and systemic disease control in high grade soft tissue sarcoma. 3) To evaluate the toxicity of primary chemotherapy, surgery, adjuvant chemotherapy and radiation therapy in this patient population.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is ongoing. Currently there are no patients enrolled on this study.

Date: 16 Oct 95 Proj No: SWOG 9124	Status: Ongoing	
Title: Evaluation of Edatrexate in Patients with Relapsed or Refractory Germ Cell Tumors.		
Start Date FY 92	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators: Ian M. Thompson MD	
Key Words: Refractory, Germ Cell Tumors	 	
And a second of the second of		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 0		

Objective(s): 1) To assess the rate and duration of response to Edatrexate. 2) Evaluate patterns of toxicity (qualitative and quantitative) in patients treated with Edatrexate Therapy will follow the schema outlined in the protocol.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study remains ongoing. There is no reportable data.

Date: 16 Oct 95 Proj No: SWOG 9129 Status: Ongoing Phase III Randomized Study of All-Trans Retionoic Acid Versus Cytosine Arabinoside and Daunorubicin as Induction Therapy for Patients with Previously Untreated Acute Promyelocytic Leukemia. Start Date FY Est Comp Date: Principal Investigator: |Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Carcinoma, Non-Small Cell Lung Accumulative MEDCASE Est Accumulative Cost: OMA Cost:

Objective(s): 1) To compare the complete remission rate and disease-free survival of TRA to that achieved with conventional induction chemotherapy including Cytosine Arabinoside plus Daunorubucin in patients with previously untreated APL. 2) To compare the toxicities of TRA to those of Cytosine Arabinoside plus Daunorubicin as Induction Therapy in APL. 3) To determine the value of maintenance therapy with TRA.

Number of Subjects Enrolled During Reporting Period: 1

Date of Periodic Review 16 Oct 95 Results Ongoing

Total Number of Subjects Enrolled to Date: 1

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is ongoing. Currently there is one patient enrolled on this study. There is no reportable data.

Date: 16 Oct 95 Proj No: SWO	G 9130 Status: Ongoing	
Title: Smoking Cessation for Early Bladder Cancer Patients Using a Combined Brief Physician Message and Cancer Information Service (CIS) Counseling Approach		
Start Date	Est Comp Date:	
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center	
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:	
Key Words:		
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:	
Number of Subjects Enrolled During Reporting Period: 1 Total Number of Subjects Enrolled to Date: 1 Date of Periodic Review 16_Oct 95 Results Completed		

Objective(s): This is a two-arm randomized trial to compare the efficacy of a brief, two-staged smoking cessation intervention with "usual care" among early stage bladder cancer patients. The primary objective of this study is to assess the efficacy of a combined physician-initiated, Cancer Information Service (CIS) reinforced quite smoking intervention compared with "usual care" in terms of the one year smoking quite rate in newly diagnosed patients with early stage bladder cancer.

Technical Approach: As outlined in the protocol schema.

Progress: Study is completed. There are no patients on followup.

Date: 16 Oct 95 Proj No: SWOG 9133 Status: Ongoing

Title: Randomized Trial of Subtotal Nodal Irradiation Versus Doxorubicin Plus Vinblastine and Subtotal Nodal Irradiation for Stage I-IIA Hodgkin's Disease, Phase III.

Start Date	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Reportation Number of Subjects Enrolled to Date of Periodic Review 16 Oct 95	ate: 0

Objective(s): 1) The primary objective is to compare the progression-free and overall survivals of non-laparotomized patients with clinical Stage I-IIA Hodgkin's Disease treated with subtotal nodal irradiation (3600-4000cGy) alone or subtotal nodal irradiation plus 3 cycles of doxorubicin and vinblastine.

Technical Approach: As outlined in the protocol schema.

Progress: There are no patients remaining on study. Study ongoing for patient accrual. There is no reportable data.

Date: 1 Dec 95 Protocol Number:	SWOG 9136 Status: Ongoing
Title: Biologic Parameters in Soft Tissue Sarcomas: A Companion Study to Select Southwest Oncology Group Clinical Trials with Soft Tissue Sarcoma Patients.	
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reporting period: 0 Fotal number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 Review results:	
Objective(s):	
Sechnical Approach: Therapy will follow the schema outlined in the protocol.	
Progress: There is no reportable data. There are no patients on study. Study remains ongoing for patient and data accrual.	

Date: 16 Oct 95 Proj No: SWOG 9139	
3 - 0.00 9133	Status: Ongoing
Title: Adjuvant Therapy of Primary Ost	eogenic Sarcomas, Phase II.
Start Date FY 92	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words: Sarcoma, Osteogenic	
l'Agr•	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review <u>16 Oct 95</u> R	. 0

Objective(s): To estimate the time to treatment failure and survival rate of the three drug combination Adriamycin, cisplatin, and ifosfamide as adjunctive treatment of osteosarcoma of the extremity. 2) To evaluate histopathologic tumor necrosis following preoperative Adriamycin, cisplatin, and ifosfamide.

3) To assess the feasibility of determining histopathologic tumor necrosis in a cooperative group setting. 4) To assess the influence of clinical prognostic variables on disease outcome. 5) To assess the toxicity of this regimen.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are no patients currently enrolled on study. Study remains ongoing for patient accrual.

Date: 16 Oct 95 Proj No: SWOG 9140	Status: Ongoing
Title: Phase II Study of Oral Biopirim Bacillus Calmette-Guerin (Tice) in Patie Bladder.	
Start Date	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review 16 Oct 95	e: 0

Objective(s): 1) Assess the response probability in order to determine whether the combination of oral bropirimine and BCG should be advanced to further studies and 2) Evaluate the qualitative and quantitative toxicities of the combination oral bropirimine and BCG.

Technical Approach: As outlined in the protocol schema.

Progress: There have been no patients enrolled to date. There is no data to report.

Date: 16 Oct 95 Protocol Number	: SWOG 9142 Status: Ongoing
Title: Evaluation of Gallium Nitrate of Bladder Carcinoma	Continuous Infusion Therapy for Advanced
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repo Total number of subjects enrolled to da Periodic review date: 16 Oct 95 R	te: 1
Objective(s): 1) Assess the efficacy as nitrate in patients who have progressed advanced or recurrent urothelial tract gallium nitrate in this group of patient	following cytotoxic chemotherapy with
Technical Approach: Therapy will follow	the schema outlined in the protocol.
Progress: There is no reportable data.	

Date: 16 Oct 95 Protocol Number:	SWOG 9147 Status: Ongoing
Title: Evaluation of Tamoxifen in Desm	oid Tumors, Phase II
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	ce:
Objective(s): 1) To assess the response with tamoxifen. 2) To assess the clonal (i.e., females heterozygous for the general representation of the general re	ity in "informative" female patients
Technical Approach: Therapy will follow	the schema outlined in the protocol.
Progress: Study continues for data accru	ual.

Status: Completed
Preceded by a 12 Hour Continuous Cytosine Arabinoside (ARA-C) for e Small Cell and Non-Small Cell Lung
Est Comp Date:
Facility: Brooke Army Medical Center
Associate Investigators:

Est Accumulative
ting Period: 0 e: 0 Results Continue

Objective(s): 1) To evaluate the response rate of this program in patients with extensive-stage small cell lung cancer (ENSCLC). 2) To evaluate the response rate of this program in patients with extensive-stage small cell lung cancer (ESCLC). 3) To assess the qualitative and quantitative toxicities of this regimen in each patient population.

Technical Approach: As outlined in the protocol schema.

Progress: There have been no patients enrolled on study to date. Study has been completed.

Date: 16 Oct 95 Protocol Nu	umber: SWOG 9149 Status: Ongoing
Title: A Phase II Study of Cisplat of Concurrent Hydroxyurea and Cyto with Malignant Gliomas	in Preceded by a 12-Hour Continuous Infusionsine Arabinoside (Ara-C) for Adult Patients
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled t Periodic review date: <u>16 Oct 95</u>	to date: 0
in patients with malignant gliomas glioblastomas) recurrent or refract nitrosoureas. 2) To evaluate the o	5-month survival rate of this 3-drug program (both anaplastic astrocytomas and cory to surgery, radiotherapy, and/or qualitative and quantitative toxicities of ation. 3) To evaluate the response rate to

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There have been no patients enrolled to date. There is no reportable data.

this regimen for this patient population.

Date: 16 Oct 95 Proj No: SWOG 9152 Status: Completed Prediction of Recurrence and Therapy Response in Advanced Germ Cell Tumors by DNA Flow Cytometry. Start Date FY 92 Est Comp Date: Principal Investigator: |Facility: Timothy J. O'Rourke, LTC, MC Brooke Army Medical Center Dept/Svc: Associate Investigators: Department of Medicine/Oncology Key Words: Accumulative MEDCASE Est Accumulative Cost: OMA Cost: Number of Subjects Enrolled During Reporting Period: Total Number of Subjects Enrolled to Date: Date of Periodic Review 15 Oct 95 Results Completed

Objective(s): 1) To determine the proliferative activity and presence of aneuploidy within paraffin-embedded histopathologic specimens from patients with advanced disseminated (poor prognosis) GCT. 2) To correlate proliferative activity and aneuploidy with clinical features including response to therapy, relapse-free survival, and overall survival in patients entered on ECOG protocol EST 3887/SWOG 8997/CALGB 8991; Phase III Chemotherapy of Disseminated Advanced Stage Testicular Cancer with Cisplatin plus Etoposide with either Bleomycin or Ifosfamide.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There are currently no patients enrolled on this study. Study has been completed.

Date: 16 Oct 95 Proj No: SWOG 9158	Status: Ongoing
Title: Evaluation of Trans Retinoic Ac with Squamous Cell Carcinoma of the Lung	id and Alpha Interferon in Patients (STAGE IV)
Start Date	Est Comp Date:
Principal Investigator: Timothy J. O'Rourke, LTC, MC	Facility: Brooke Army Medical Center
Dept/Svc: Department of Medicine/Oncology	Associate Investigators:
Key Words:	
Accumulative MEDCASE Cost:	Est Accumulative OMA Cost:
Number of Subjects Enrolled During Report Total Number of Subjects Enrolled to Date Date of Periodic Review 16 Oct 95 Re	e: 0

Objective(s): 1) To assess the response rate to trans-Retinoic Acid and Alpha Interferon used in a daily schedule for patients with advanced, well differentiated squamous cell carcinoma of the lung. 2) To further define the qualitative toxicities of this regimen administered to this patient population in a Phase II study.

Technical Approach: As outlined in the protocol schema.

Progress: There are no patients enrolled on this study. Study remains

ongoing.

Date: 16 Oct 95 Protocol Number: SWOG 9201 Status: Ongoing

Title: "Phase III Trial to Preserve the Larynx: Induction Chemotherapy and Radiation Therapy versus Concomitant Chemotherapy and Radiation Therapy versus Radiation."

Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	1
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Rev	te: 1

Objective(s): The primary endpoint is survival with preservation of laryngeal function. In achieving this overall goal the following outcomes will be assessed: 1) Length of disease-free survival with a preserved larynx. 2) Length of overall survival. 3) Evaluation of tumor response at the completion of chemotherapy prior to RT for induction chemotherapy (Arm 1) and at the completion of RT for concomitant treatment (Arm 2). 4) Patterns of relapse: local and regional recurrence and distant metastasis. The incidence of second primary tumors. 5) Incidence of adverse effects: acute and late. 6) Concomitant morbidity of neck dissection and/or laryngeal salvage surgery. 7) QOL for patients with laryngeal preservation versus patients requiring salvage laryngectomies. 8) To evaluate QOL outcomes between patients receiving radiation therapy alone and those receiving adjuvant therapy.

Technical Approach: As outlined in the protocol schema.

Progress: Currently there is one patient enrolled on study. Study remains ongoing for patient accrual.

Date: 16 Oct 95 Protocol Number:	SWOG 9205 Status: Ongoing
Title: Central Prostate Cancer Serum R	epository Protocol
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Rev	e: <u>18</u>
Objective(s): 1) To store serum of pati	ients with cancer of the prostate

Objective(s): 1) To store serum of patients with cancer of the prostate entered onto clinical trials conducted by the Southwest Oncology Group Genitourinary Committee. 2) To provide the serum of the above patients entered on Southwest Oncology Group studies for specific clinical-laboratory investigations (e.g. evaluation of a new marker) outlined on separate Southwest Oncology Group protocols approved by the Genitourinary Committee Tumor Biology Subcommittee.

Technical Approach: As outlined in the protocol schema.

Progress: Fourteen patients remain on this study. Study is ongoing for patient followup and accrual.

Date: 16 Oct 95 Protocol Numb	er: SWOG 9210 Status: Ongoing
Title: "A Phase III Randomized Trial o Myeloma Comparison of (1) VAD-P to VAD- Randomization of Prednisone Dose Intens	P/Ouinine for Induction. (2)
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Rev	:e: 0

Objective(s): 1) To compare the effectiveness of the VAD-P chemotherapy regimen when administered alone or in combination with the chemosensitizer quinine intended to block the emergence of multidrug resistance during remission induction in previously untreated patients with multiple myeloma. This will be evaluated in terms of response \geq 50% regression), overall and relapse-free survival, and P-glycoprotein expression prior to therapy at the end of induction therapy in relation to the induction therapy arm. 2) To evaluate the chemosensitizing potential of quinine to reverse drug resistance in myeloma patients randomized to VAD-P induction who fail to achieve at least 25% regression with chemotherapy alone. 3) To compare the value of alternate day prednisone (10 mg) versus 50 mg of prednisone for remission maintenance for patients proven to achieve at least 25% regression. The effectiveness of the two maintenance arms will be compared in terms of the duration of relapsefree survival and overall survival from the time of randomization of maintenance therapy.

Technical Approach: As outlined in the protocol schema.

Progress: There are currently no patients on study. Study is ongoing for patient accrual.

Date: 16 Oct 95 Protocol Number	: SWOG 9216 Status: Ongoing
	ady of CODE Plus Thoracic Irradiation Versus
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service	Associate Investigator(s):

Cumulative MEDCASE cost: Estimated cumulative OMA cost:

Number of subjects enrolled during reporting period: 0

Total number of subjects enrolled to date: 1

Periodic review date: 16 Oct 95 Review results: Continue

Objective(s): To determine whether the CODE regimen plus thoracic irradiation is superior to standard alternating CAV and EP in the treatment of extensive stage small cell lung cancer in terms of: 1) overall survival; 2) time to disease progression; 3) response rate; 4) response duration; 5) quality of life.

Technical Approach: As outlined in the protocol schema.

Medicine/Hematology/Oncology

Key Words:

Progress: One patient remains on study. Study is ongoing for patient accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9217 Status: Ongoing

Title: "Chemoprevention of Prostate Cancer with Finasteride (Proscar), Phase III Intergroup."

acility: rooke Army Medical Center, Texas
ssociate Investigator(s): IC Ian M. Thompson, MC
stimated cumulative OMA cost:

Objective(s): To test the difference in the biopsy-proven prevalence of carcinoma of the prostate between a group of participants treated with finasteride and a group treated with placebo for seven years.

Technical Approach: As outlined in the protocol schema

Periodic review date: <u>16 Oct 95</u> Review results:

Progress: Two-hundred twenty-eight patients remain on study. Study is ongoing for patient data accrual and followup.

Date: 16 Oct 95 Protocol Number: SWOG 9218 Status: Completed

Title: "Measurement of O⁶ MGMT in Patients with High Grade Primary Brain Tumors Treated with Radiation Therapy and BCNU, Ancillary Study"

Start date:

Principal Investigator:
Timothy J. O'Rourke, COL, MC

Department/Service:
Medicine/Hematology/Oncology

Key Words:

Cumulative MEDCASE cost:

Department Service:
Medicine/Hematology/Oncology

Estimated completion date:

Associate Investigator(s):

Estimated cumulative OMA cost:

Department/Service:
Medicine/Hematology/Oncology

Estimated cumulative Oma cost:

Department/Service:

Medicine/Hematology/Oncology

Estimated completion date:

Department/Service:

Associate Investigator(s):

Department/Service:

Associate Investigator(s):

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Objective(s): To explore the prognostic significance of O⁶-Methylguanine-DNA Methyltransferase (O⁶ MGMT) in predicting survival among patients with high grade gliomas receiving BCNU and radiation therapy, and to develop a preliminary definition of good risk/poor risk categories based on low/high levels of O⁶ MGMT issue levels.

Technical Approach: As outlined in the protocol schema.

Progress: There have been no patients entered on this study. There is no reportable data.

Date: 16 Oct 95 Prot	tocol Number.	CWOC 0210	G	
			Status:	55
Title: A Phase II Evaluat: Hodgkin's Lymphoma or Hodgk	ion of Interle kin's Disease	ukin-4 (IL-4)	in Patient	ts with Non-
Start date:		Estimated cor	mpletion da	ite:
Principal Investigator: Timothy J. O'Rourke, COL, M	IC	Facility: Brooke Army M	Medical Cer	iter, Texas
Department/Service: Medicine/Hematology/Oncolog	Y	Associate Inv	estigator(s):
Key Words:				
Cumulative MEDCASE cost:		Estimated cum	ulative OM	A cost:
Number of subjects enrolled Total number of subjects en	rolled to date			
Periodic review date: <u>16 O</u>	ct 95 Rev	iew results:	Continue	
Objective(s): 1) To assess Hodgkin's lymphoma, refractory Hodgassess the qualitative and cadministered in a Phase II s	ory intermedia gkin's disease quantitative t study.	te or high grant treated with oxicities of	ade non-Hoo interleuk: interleukin	dgkin's in-4. 2) To 1-4
Sechnical Approach: Therapy	will follow t	he schema out:	lined in th	ne protocol.
Progress: This is a new st	udy. There is	s no reportabl	le data.	

Date: 16 Oct 95 Protocol Number:	SWOG 9221 Status: Ongoing
Title: Phase III Double-Blind Randomize CRA) to Prevent Second Primary Tumors (Scancer	ed Trial of 13-Cis Retinoic Acid (13- SPTs) in Stage I Non-Small Cell Lung
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: 16 Oct 95 Re	te: <u>0</u>
Objective(s): 1) To evaluate the efficated reducing the incidence of SPTs in patient non-small cell lung cancer with complete the qualitative and quantitative toxicity.	nts who have been treated for Stage I e surgical resection. 2) To evaluat

the qualitative and quantitative toxicity of 13-CRA in a daily administration schedule. 3) To compare the overall survival of patients treated with 13-CRA vs. patients treated with placebo.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

Date: 16 Oct 95 Protocol Number	r: SWOG 9228 Status: Completed
Title: Evaluation of Interleukin-4 (II Phase II.	L-4) in Disseminated Malignant Melanoma,
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Ro	te: 0
Objective(s): 1) To evaluate the response to the response treated with interleukin-4. 2 particular to the response to the resp	onse rate of disseminated malignant
Sechnical Approach: Therapy will follow	v the schema outlined in the protocol.
Progress: Study is completed. There is followup.	s no reportable data. No patients on

Date: 16 Oct 95 Protocol Number:	SWOG 9230 Status: Completed	
Title: Evaluation of Interleukin-4 (II Adenocarcinoma, Phase II	J-4) in Disseminated Renal Cell	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during reportotal number of subjects enrolled to da Periodic review date: 16 Oct 95 R	te: <u>0</u>	
Objective(s): 1) To evaluate the response renal cell adenocarcinoma treated with qualitative and quantitative toxicities Phase II study.	interleukin-4. 2) To assess the	
Technical Approach: Therapy will follow	the schema outlined in the protocol	
Progress: Study is completed. There i	s no reportable data.	

Date: 16 Oct 95 Protocol Number:	SWOG 9237 Status: Ongoing
Title: Evaluation of Topotecan in Refr Phase II	actory and Relapsing Multiple Myeloma
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	e: 0

Objective(s): 1) To evaluate the response rate for refractory myeloma treated with topotecan. 2) To evaluate the qualitative and quantitative toxicities of topotecan administered in a Phase II Study. 3) To measure topoisomerase levels in multiple myeloma cells.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

Date:	16 Oct 95	Protocol Number	: SWOG 9242 Stat	us: Ongoing
Title:	Evaluation of	Taxotere in Smal	l Cell Lung Carcinoma	, Phase II
Start	date:		Estimated completi	on date:
	pal Investigato y J. O'Rourke,		Facility: Brooke Army Medica	l Center, Texas
_	ment/Service: ne/Hematology/O	ncology	Associate Investig	ator(s):
Key Wo	rds:		 	
Cumula	tive MEDCASE co	st:	Estimated cumulati	ve OMA cost:
Total r	number of subje	cts enrolled to da	orting period: 1 ate: 1 Review results: Cont	inue
of Taxo	otere given eve	ry three weeks by	cacy, as measured by the intravenous infusion all lung cancer. 2)	to patients with

clinical and laboratory toxicities as well as patient tolerance of this dose/schedule of intravenous Taxotere.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. There is no reportable data available.

Date:	16 Oct 95	Protocol Numbe:	r: SWOG 9246 Status: Ongoing
Title:	: A Phase II E oma or Relapsed	valuation of Taxol Hodgkin's Disease	l in Patients with Relapsed Non-Hodgkin e
Start	date:		Estimated completion date:
	pal Investigat y J. O'Rourke,		Facility: Brooke Army Medical Center, Texas
	ment/Service: ne/Hematology/	Oncology	Associate Investigator(s):
Key Wo	rds:		
Cumula	tive MEDCASE co	ost:	Estimated cumulative OMA cost:
Total i	number of $\operatorname{subj}\epsilon$	ects enrolled to d	orting period: 0 ate: 1 Review results: Continue
Object: Hodgkir	ive(s): 1) To n's lymphoma, n lapsed Hodgkin'	assess the responselapsed intermediated	se rate of relapsed low grade non- ate or high grade non-Hodgkin's lympho with taxol. 2) To assess the s of taxol administered in a Phase II

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patients remains on followup. There is no reportable data available.

Date: 16 Oct 95 Protocol Number: SWOG 9248 Status: Completed

Title: A Phase II Trial of Paciltaxel (TAXOL) in Patients with Metastatic

Refractory Carcinoma of the Breast

Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:	7 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to day Periodic review date: 16 Oct 95 Review		

Objective(s): 1) To evaluate the subjective improvement in patients with symptomatic refractory carcinoma of the female breast treated with paclitaxel. 2) To evaluate the clinical response rate of paciltaxel in patients with refractory carcinoma of the female breast. 3) To evaluate the qualitative and quantitative toxicities of paciltaxel in a Phase II study.

Technical Approach: As outlined in the protocol schema.

Progress: There have been no patients enrolled this year. Study is closed to further patient accrual. There are no patients on followup.

Date:	16 Oct 95	Protocol Numbe	r: SWOG 9250 Status: Ongoing
Title: 5-FU af Colon (fter Curative	tergroup Prospect Resection, Follow	ively Randomized Trial of Perioperative ed by 5-FU/Levamisole for patients with
Start d	late:		Estimated completion date:
	oal Investigato , J. O'Rourke,		Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology-Oncology		Oncology	Associate Investigator(s):
Key Wor	ds:		
Cumulat	ive MEDCASE co	ost:	Estimated cumulative OMA cost:
Total n	umber of subje	ects enrolled to d	porting period: 0 late: 0 Review results: Completed
Objecti	ve(s): 1) To	determine if adju	want therapy with one week of continuous.ve colon resection followed by 12 month

Objective(s): 1) To determine if adjuvant therapy with one week of continuous 5-FU given within 24 hours of a curative colon resection followed by 12 months of 5-FU/levamisole is effective in prolonging the disease free interval and increasing survival in patients with Dukes' B3 or C colon cancer, when compared to patients who are treated with 5-FU/levamisole only. 2) To establish within ECOG a Central Tissue Repository for paraffin blocks and a frozen tissue bank.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is completed. There is no reportable data. There are no patients on followup.

Date:	16 Oct 95	Protocol Number	: SWOG 9252	Status:	Ongoing
Title: Patients Cancer	Prospective Ras with Complete	andomized Trial o	F Postoperative	e Adjuvant IIIa Non-S	Therapy in
Start da	ite:		Estimated co	mpletion d	ate:
	l Investigator J. O'Rourke, C		Facility:	Medical Ce	nter, Texas
	nt/Service: /Hematology-On	cology	Associate In	vestigator	(s):
Key Word	s:		 		
Cumulati	ve MEDCASE cos	t:	 Estimated cur	mulative Of	MA cost:
Total num	wher of subject	olled during repo ts enrolled to da 16 Oct 95 R	te: 1		
Objective radiother	e(s): 1) To de	etermine if combiner to thoracic race	nation chemothe	rany plus	thoracic

Objective(s): 1) To determine if combination chemotherapy plus thoracic radiotherapy is superior to thoracic radiotherapy alone in prolonging survival in patients with completely resected Stage II and Stage IIIa non-small cell lung cancer. 2) To determine if combination chemotherapy plus thoracic radiotherapy is superior to thoracic radiotherapy alone in preventing local recurrence in patients with resected Stage II and Stage IIIa non-small cell lung cancer.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient remains on study. Study continues for data accrual.

Date: 16 Oct 95 Protocol Number	: SWOG 9300 Status: Ongoing
Title: A Randomized Phase II Evaluation with Interferon-Alfa 2a (IFN-alfa 2a) (Hydroxyurea (HU) in Patients with Newly in Chronic Phase.	on of All Trans-Retinoic Acid (ATRA) or All Trans-Retinoic Acid with y Diagnosed Chronic Myelogenous Leukem
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reportation of subjects enrolled to da Periodic review date: <u>16 Oct 95</u> R	te: 1 eview results: <u>Continue</u>
Objective(s): 1) To estimate whether to leukemia (CML) in chronic disease phase in combination with either hydroxyurea sufficiently effective based on either lightly its investigation in Phase III to the least of	using all trans-retinoic acid (ATRA) (HU) or interferon-alfa 2a (IFN) is
Technical Approach: Therapy will follow	the schema outlined in the protocol.
Progress: One patient remains on study. accrual. There is no reportable data.	Study still ongoing for patient

Date: 16 Oct 95 Protocol Number	: SWOG 9303 Status: Ongoing
Title: "Phase III Study of Radiation T versus 5-Fluorouracil and Levamisole in Resected Colon Cancer"	Therapy, Levamisole and 5-Fluorouracil Selected Patients with Completely
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Rev	:e: 0
Objective(s): 1) The primary goal of the 5FU, levamisole and radiation therapy rewhen compared to 5FU and levamisole with management of patients with completely reancer and selected patients with T_3N_{1-2} of survival, patterns of failure and toxici radiation therapy improves disease-free toxicity will also be evaluated. If radiative will also be given to further evaluation may be given to further evaluation therapy will patient benefit, however, if it results	esults in superior overall survival about radiation therapy in the resection pathologic stage T _{4bN} O-2 color colon cancer. 2) Disease-free ty will also be evaluated. If survival, patterns of failure and diation therapy improves disease-free without improving survival raluation of RT in subsequent trials.

Technical Approach: As outlined in the protocol schema.

Progress: There have been no patients enrolled on study this year. Study remains ongoing for patient accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9304 Status: Ongoing

Title: Postoperative Evaluation of 5-FU by Bolus Injection versus 5-FU by Prolonged Venous Infusion Prior To and Following Combined Prolonged Venous Infusion Plus Pelvic XRT Versus Bolus 5-FU Plus Leucovorin Plus Levamisole Prior to and Following Combined Pelvic XRT plus Bolus 5-FU Plus Leucovorin in Patients with Rectal Cancer, Phase III.

Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during reporting period: 0 Potal number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 Review results: Continue		

Objective(s): 1) To compare the effectiveness of 5-FU by bolus injection vs 5-FU by prolonged venous infusion given prior to and following combined pelvic XRT + protracted venous infusion (PVI) vs 5-FU by bolus injection plus LV plus LEV given prior to and following combined pelvic XRT plus bolus 5-FU plus LV in the treatment of modified Astler-Collier Stages B2, B3 and C rectal cancer. This will be evaluated in terms of survival and relapse-free survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study remains open for patient accrual. There is no reportable data.

Date: 16 Oct 95 Protocol Number	: SWOG 9306 Status: Ongoing
Title: Conservative Treatment of Adeno Resection Plus Adjuvant 5-FU/Radiation	
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology-Oncology	Associate Investigator(s):
Key Words:	1
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	te: <u>0</u>
Objective(s): 1) To determine whether adenocarcinoma of the rectum who have be sparing surgery is comparable to that or radical surgery (abdominoperineal resect survival of patients with T_3 adenocarcin conservatively treated is comparable to with abdominoperineal resection. 3) To rate of rectal cancer patients treated to of stage $(T_1/T_2 \text{ or } T_3)$.	een treated with limited sphincter f historical controls treated with tion). 2) To determine whether the toma of the rectum who have been that of historical controls treated assess the loco-regional recurrence

Technical Approach: This is a new study. There is a no reportable data.

Progress: There have been no patients entered on study during this reporting period. Study remains ongoing for patient and data accrual.

Date: 16 Oct 95 Protocol Number	: SWOG 9307 Status: Ongoing	
Title: Extended Administration of Oral for the Treatment of Poor Prognosis Extended Phase II Pilot.	l Etoposide and Oral Cyclophosphamido	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repo Total number of subjects enrolled to da Periodic review date: <u>16 Oct 95</u> R	te: 0	
Objective(s): 1) To estimate the respondance and cyclophed	nse rate of extended oral osphamide in poor prognosis extensive evaluate the qualitative and administered in a Phase II study	

lations between peak and trough plasma etoposide levels versus complete response, toxicity, and survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There have been no patients enrolled during this reporting period. There is no reportable data.

Date:	16 Oct 95	Protocol Number	r: SWOG 9308	Status:	Completed
	Randomized Toine in the Tre	rial Comparing Ciratment of Previous	splatin with Cisp sly Entreated, St	platin Plu Lage IV No.	s Intravenous n-Small Cell
Start	date:		Estimated com	pletion da	ate:
Princip Timoth	pal Investigat y J. O'Rourke,	or: COL, MC	Facility: Brooke Army M	edical Cer	iter, Texas
	ment/Service: ne/Hematology-(Oncology	Associate Inv	estigator(s):
Key Wor	rds:		- 		
Cumulat	ive MEDCASE co	est:	Estimated cum	lative OM	A cost:
TOTAL II	unmer or subje	rolled during repo cts enrolled to da 	to. 1	_	1
Objecti intrave	ve(s): 1) To nous Navelbine tment failure	compare the effect plus cisplatin on with patients with	of cisplatin al	one with t	hat of
Technica	al Approach:	Therapy will follo	w the schema out	lined in t	he protocol.

Progress: One patient was enrolled during this reporting period. There is no reportable data. There are no patients on followup.

Date: 16 Oct 95 Protocol Number:	SWOG 9312 Status: Ongoing	
Title: Phase II Evaluation of Cisplati patients with Locally Advanced/Inoperal	in % 5-FU & Radiation Therapy in ble Bladder Cancer	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology-Oncology	Associate Investigator(s):	
Key Words:	 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	te: 0	
Objective (a)		

Objective(s): 1) To assess the response rate and the feasibility of utilizing cisplatin + 5-FU + radiation therapy in patients with locally advanced/inoperable carcinoma of the bladder. 2) To assess the qualitative and quantitative toxicities of this combination. 3) To perform a preliminary study to assess: (a) The potential role of DNA ploidy analysis as a predictor of response to combined therapy in locally advanced bladder cancer. (b) The potential value of suppressor gene expression analysis (p53 and retinoblastoma gene) as prognostic indicator.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There were no patients enrolled during this reporting period. There is no reportable data.

Date: 16 Oct 95 Protocol Number:	SWOG 9310 Status: Ongoing	
Title: An Intergroup Phase II Combined Nervous System Lymphoma	Modality Treatment of Primary Central	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology-Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: 16 Oct 95 Re	:e: <u>0</u>	
Objective(s): 1) To assess the rate of chemotherapy prior to the start of radia	tion. 2) To compare survival using a	

Objective(s): 1) To assess the rate of tumor response to combination chemotherapy prior to the start of radiation. 2) To compare survival using a combined modality approach to historical controls using radiotherapy alone 3) To assess the long-term toxicity of this regimen. 4) Based upon the response rate and survival of patients enrolled in this study, to consider a randomized trial to compare chemotherapy alone vs chemotherapy plus radiation in an effort to reduce the morbidity of cranial irradiation.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9313 Status: Ongoing Title: Phase III Comparison of Adjuvant Chemotherapy with High Dose Cyclophosphamide plus Doxorubicin (AC) versus Sequential Doxorubicin followed by Cyclophosphamide (A->C) in High-Risk Breast Cancer Patients with 0-3 Positive Nodes (Intergroup) Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 2 Total number of subjects enrolled to date: 2 Periodic review date: 16 Oct 95 _ Review results: <u>Continue</u>

Objective(s): 1) To compare disease-free survival (DFS), overall survival (S), and toxicity of high-risk primary breast cancer patients with negative axillary lymph nodes or with one to three positive nodes treated with adjuvant high-dose chemotherapy with doxorubicin plus cyclophosphamide (AC), versus high-dose sequential chemotherapy with doxorubicin followed by cyclophosphamide (A-C). 2) To obtain tumor tissue for biologic studies. The details of these biologic studies will be described in a companion protocol or protocols to be developed through the intergroup mechanism.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Two patients remain on study. There is no reportable data.

Date: 16 Oct 95 Protocol Number:	SWOG 9314 Status: Ongoing	
Title: Biologic Factors Predicting Res Registered to SWOG 8228, Ancillary	ponse to Tamoxifen in Patients	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	:e:	
Objective(s):		
Technical Approach: Therapy will follow	the schema outlined in the protocol.	
Progress: Study continues for patient and data accrual.		

Date: 16 Oct 95 Protocol Number	r: SWOG 9320 Status: Ongoing
Title: A Phase II Study of ProMACE-Cy Sulfamethoxazole, Zidovudine (AZT) and (G-CSF) in Patients with AIDS-related	Granulocyte Colony Stimulating Roston
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	-
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reportation of subjects enrolled to depend on the contract of the contract	ate:
Objective(s): 1) To assess the respons	se rate of AIDS-related lymphomas
Technical Approach: Therapy will follow	v the schema outlined in the protocol.
Progress: Study continues for patient	and data accrual.

Date: 16 Oct 95 Protocol Number:	SWOG 9321 Status: Ongoing	
Title: Standard Dose Versus Myeloablat Symptomatic Multiple Myeloma	ive Therapy for Previously Untreated	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:	7 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repo Total number of subjects enrolled to da Periodic review date: 16 Oct 95 R	te: <u>1</u>	
Objective(s): 1) To perform a randomiz with symptomatic multiple myeloma (MM), myeloablative therapy, in order to exam cytoreduction effected by intensive the of complete remission translates into exprogression-free survival.	of standard therapy versus ine whether the greater tumor rapy and manifested by higher incidence	

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: One patient was enrolled during this reporting period and will continue on study. There is no reportable data.

Date: 16 Oct 95 Protocol Number:	SWOG 9223 Status: Ongoing		
Title: Laboratory/Clinical Correlative Ancillary Study to SWOG 9252			
Start date:	Estimated completion date:		
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):		
Key Words:			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:		
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: 16 Oct 95 Re	~ •		
Objective(s): 1) To determine the incid assess Group A blood antigen and EGF rec markers on keratin-negative, mucin-negat assess P105 and Factor 8 levels in paties or IIIA NSCLS. 2) Correlate these resultime to relapse, and survival. 3) Estable repository.	ence of K-ras and P53 mutations; eptor levels; evaluate neuroendocrine ive tumors by electron microscopy; and nts with completely resected Stage II		

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for data collection and analysis.

Date:	16	Oct 95	Pi	rotocol	Numbe	r: SWOG	9325	Status	s: On	going	
								Interferon Interferon			
for 1 Y	ear?	at High	Dosage	to In	terfer	on Long-T	erm'	Therapy at taneous Mel	Lower	Dosag	ge as

Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date: 16 Oct 95	date: 1

Objective(s): 1) Analysis of the <u>in vivo</u> immunomodulatory effects of IFN alfa-2b upon host lymph node and/or blood lymphocyte effector cell function and phenotype obtained. 2) Analysis of the modulatory anti-proliferative and enzyme inductive effect of <u>in vitro</u> IFN alfa-2b exposure upon autologous tumor cells (in those subjects from whom lymph node tumor has been harvested) 3) Correlation of host immunomodulatory effects, tumor cell surface antigen modulation and susceptibility to host effector cell function, and serological response to autologous tumor with disease outcome in reference to IFN alfa-2b against autologous or HLD-matched allogeneic tumor cells will be (a) . Cytotoxicity; (b) Cytokine modulation.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9328 Status: Ongoing

Title: Autologous Bone Marrow Transplantation for Patients with Acute Myeloid Leukemia Beyond First Remission: A Randomized Trial of Post-Transplant Therapy with Interleukin-2 versus Observation, Phase III

Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Fotal number of subjects enrolled to dat Periodic review date: _16 Oct 95	cting period: 0	

Objective(s): 1) To compare the disease-free survival and overall survival of patients with acute myeloid leukemia (AML) in untreated first relapse (Rel 1) or second complete remission (CR2) treated by autologous bone marrow transplantation (ABMT), using marrow obtained while in CR1 or CR2 and who then receive either post-transplant therapy with interleukin-2 (IL-2) or not further treatment. 2) To assess the frequency and severity of toxicity associated with post-transplant IL-2 therapy.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There were no patients enrolled during this reporting period. There is no reportable data.

Date: 16 Oct 95 Protocol Number: SWOG 9332 Status: Completed Title: Phase III Trial of Adriamycin Versus Taxol Versus Taxol Plus Adriamycin Plus G-CSF in Metastatic Breast Cancer Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology-Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: _0_ Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 __ Review results: Completed Objective(s): 1) To compare the objective response rate and time to progression of single-agent Adriamycin, single-agent Taxol, and the combination of Adriamycin and Taxol in patients with previously untreated

Objective(s): 1) To compare the objective response rate and time to progression of single-agent Adriamycin, single-agent Taxol, and the combination of Adriamycin and Taxol in patients with previously untreated metastatic breast cancer. 2) To compare the toxicity of Adriamycin, Taxol, and Adriamycin and Taxol given in combination. 3) To determine whether Taxol and Adriamycin exhibit crossover resistance to each other. 4) To compare the quality of life of patients who have received Taxol, Adriamycin, or the combination of Taxol and Adriamycin as first-line therapy for metastatic breast cancer. 5) To compare the quality of life of patients who have received Taxol or Adriamycin as second-line therapy. 6) To evaluate the relation of steady state Taxol levels to therapeutic response and toxicity.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is closed to patient accrual. There is no reportable data.

Date: 1 Dec 95 Protocol Number:	SWOG 9333 Status: Ongoing
Title: A Randomized Controlled Trail Daunomycin and Cytosine Arabinoside as 55 With Previously Untreated Acute Mye	Induction Therapy in Patients Oron Ame
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: <u>16 Oct 95</u> R	te· 0
Objective(s): 1) To compare the comple survival and duration of relapse-free s	te remission (CR) rate duration of

Objective(s): 1) To compare the complete remission (CR) rate, duration of survival and duration of relapse-free survival (time from CR until relapse or death) for patients aged 56 or older with acute myeloid leukemia (AML) treated with daunomycin (daunorubicin, DNR) and cytosine arabinoside (Ara-C) or with mitoxantrone (Mito) and etoposide (VP-16). 2) To assess the frequency and severity of toxicities and the durations of neutropenia, thrombocytopenia, and first hospitalization associated with the two induction chemotherapy regimens.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 00	et 95	Protocol Numbe	er: SWOG 9336	Status: Ongoing	
Radiotherapy	, and Con Plus Rad	iotherapy Follow	rapy Plus Radio	nemotherapy Plus otherapy, and Concurrent Resection of Stage IIIA	
Start date:			Estimated c	completion date:	
Principal In Timothy J. O	_		Facility: Brooke Army	Medical Center, Texas	
Department/S Medicine/Hem		ncology	Associate I	Associate Investigator(s):	
Key Words:			 ! !		
Cumulative M	EDCASE cos	şt:	Estimated co	umulative OMA cost:	
Total number	of subject	colled during reports enrolled to co	date: <u>0</u>		
followed by a progression-i the same chem IIIa (N2-posi local and dis	surgical r free, medi motherapy itive) non stant fail	esection results an, and long-ter plus standard ra -small cell lung ure for patients	s in a significa rm (2-year, 5-yeadiotherapy alor g cancer. 2) Ev s enrolled in ea	therapy and radiotherapy ant improvement in ear) survival compared to be for patients with Stag valuate the patterns of each arm of the study, in ontrol and distant	

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study is closed to patient accrual. There is no reportable data.

Date: 16 Oct 95 Protocol Number: SWOG 9339 Status: Ongoing Title: Evaluation of Topotecan in Esophageal Carcinoma, Part II Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0

Objective(s): 1) To evaluate the response rate of esophageal carcinoma treated with topotecan. 2) To evaluate the qualitative and quantitative toxicities of topotecan administered in a Phase II study.

Periodic review date: <u>16 Oct 95</u> Review results: <u>Continue</u>

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There were no patients enrolled during this reporting period. There is no reportable data.

Date: 16 Oct 95 Protocol Number:	SWOG 9340 Status: Ongoing
Title: A Phase III Randomized Study of Procarbazine, CCNU, and Vincristine (PC Astrocytomas	Radiotherapy with or with Budr Plus V) for the Treatment of Anaplastic
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	e: 0
Objective(s): To compare the efficacy of	of treatment with radiotherapy and PCV

Objective(s): To compare the efficacy of treatment with radiotherapy and PCV chemotherapy versus radiotherapy plus Budr and PCV chemotherapy. The endpoints for this evaluation will be: 1. Time to disease recurrence or progression, measured from the first day of treatment. 2. Response rates and disease stabilization rates. 3. Survival time, measured from th first day of treatment. 4. Activity level as determined by Karnofsky Performance Status.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9341 Status: Ongoing Title: A Phase II High Dose Ifosfamide (HDI) with Mesna and Granulocyte-Colony Stimulating Factor (rhg-CSR) in Unresectable Malignant Mesothelioma Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0Periodic review date: 16 Oct 95 Review results: <u>Continue</u> Objective(s): 1) To assess the activity of high-dose ifosfamide and mesna with recombinant human G-CSF (rhg-CSF) in patients with unresectable malignant mesothelioma. 2) To evaluate the toxicity pattern of high-dose ifosfamide/mesna/rhg-CSF given according to this outpatient schedule. Technical Approach: Therapy will follow the schema outlined in the protocol. Progress: Study continues for patient and data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9343 Status: Ongoing

Title: Evaluation of Combined Androgen Suppression and Fixed Schedule Suramin in Patients with Newly Diagnosed Metastatic Prostate Cancer

Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during	reporting period: 0

Total number of subjects enrolled to date: 0

Periodic review date: 16 Oct 95 Review results: Continue

Objective(s): 1) The primary objective of this pilot study is to assess the

Objective(s): 1) The primary objective of this pilot study is to assess the feasibility of fixed schedule suramin plus combined androgen suppression (orchiectomy plus flutamide, or LHRH agonist plus flutamide) in a cooperative group setting in patients with newly diagnosed Stage D2 prostate cancer. Feasibility evaluation is based on an assessment of the magnitude of suramin-related neurotoxicity or treatment interruption of four weeks or more. 2) Progression-free survival and survival will also be estimated.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There were no patients enrolled during this reporting period. There is no reportable data.

Date: 16 Oct 95 Protocol Number: SWOG 9347 Ongoing Status: Title: Phase III Comparison of Tamoxifen vs Tamoxifen with Ovarian Ablation in Premenopausal women with Axillary Node - Negative Receptor - Positive Breast Cancer < cm. Intergroup Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 ___ Review results: <u>Continue</u> Objective(s): 1) To compare the disease-free survival, overall survival, and

toxicity of treatment in hormone receptor-positive, premenopausal women with axillary lymph node-negative breast cancer measuring 3 cm or less given adjuvant therapy with tamoxifen alone or tamoxifen with ovarian ablation. 2) To obtain tumor tissue from these patients for future biologic studies of relevance to this patient population. 3) To compare menopausal symptoms, sexual function and quality of life in patients receiving tamoxifen alone with patients receiving tamoxifen plus ovarian ablation.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Protocol Number: SWOG 9348

Date: 16 Oct 95

Status: Ongoing Title: Evaluation of the Standard BCNU/DTIC/Cisplatin/Tamoxifen Regimen in Disseminated Malignant Melanoma, Phase II Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 __ Review results: <u>Completed</u>

Objective(s): 1) To estimate the response rate of the combination of BCNU/DTIC/Displatin/tamoxifen with patients with disseminated malignant melanoma in order to select the appropriate regimen for combination with alpha-interferon in a future Phase III trial. 2) To accurately determine the toxicities of this drug combination in order to issues as feasibility in a future Phase III trial.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: There were no patients enrolled during this reporting period. Study is completed. There are no patients on followup.

Date: 16 Oct 95 Protocol Number:	SWOG 9349 Status: Ongoing	
Title: A Randomized Phase II Trial of CHOP with G-CSF Support or ProMACE-CytaBOM with G-CSF Support for Treatment of Non-Hodgkin's Lymphoma		
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:	1 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 Review results: Continue		
Novice results. Concinde		

Objective(s): 1) To evaluate the effectiveness of the dose intense CHOP chemotherapy regimen (cyclophosphamide, vincristine, doxorubicin and prednisone) with G-CSF support and the dose intense ProMACE-CytaBOM chemotherapy regimen (cyclophosphamide, doxorubicin, etoposide, prednisone, cytosine, arabinoside, bleomycin, vincristine, methotrexate and leucovorin) with G-CSF support in previously untreated patients with intermediate and high grade non-Hodgkin's lymphomas. The effectiveness of the regiments will be based on the estimate of the complete response rate, the time to treatment failure, and ultimately overall survival. 2) To assess the toxicities and side effects associated with the regimens. 3) A secondary objective is to further utilize the central serum and tissue repositories enabling clinicopathologic correlations with the results of studies on the material collected (see companion studies, SWOG 8219, 9245 and 8947.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9401 Status: Ongoing

Title: A Controlled Phase III Evaluation of 5-FU Combined with Levamisole and Leucovorin as Surgical Adjuvant Treatment Following Total Gross Resection of Metastatic Colorectal Cancer

Start date:	Estimated completion date:		
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):		
Key Words:			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:		
Number of subjects enrolled during : Total number of subjects enrolled to Periodic review date: <u>16 Oct 95</u>	o date: _0		

Objective(s): Current Mayo/NCCTG research protocol (89-46-51) for patients with high risk stage II (selected Dukes' B2, B3) and stage III colon cancer is comparing the standard 5FU plus levamisole combination with a new three drug regimen of 5FU plus levamisole combination with a new three drug regimen of 5FU plus levamisole plus leucovorin. Both regimens are given for a period of one year. Patients are also being randomly assigned to either 12 months of therapy (the standard) or 6 months of therapy (the experimental approach) to address the secondary question of optimal treatment duration.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9402 Status: Ongoing

Title: Phase III Intergroup Randomized Comparison of Radiation Alone vs Pre-Radiation Chemotherapy for Pure and Mixed Anaplastic Oligodendrogliomas

Estimated completion date:
Facility: Brooke Army Medical Center, Texas
Associate Investigator(s):
Estimated cumulative OMA cost:

Total number of subjects enrolled to date: 0

Periodic review date: 16 Oct 95 Review results: Continue

Objective(s): 1) The primary endpoint of this trial is overall survival. 2) This study will compare time to tumor progression between the two arms. The frequency of seven ≤ grade 3 toxicities will be examined. 4) This study will compare quality of life and neurologic function between the two arms. 5) This study will identify the key histopathologic criteria necessary to make the diagnosis of anaplastic oligodendroglioma and mixed oligoastrocytoma; evaluate the diagnostic and prognostic relevance of chromosomal alterations; evaluate the diagnostic and prognostic relevance of DNA ploidy and indices of proliferation including percent S and percent G2M; study the diagnostic and prognostic relevance of immunohistochemical markers of cellular function and/or glial development; and evaluate the translational relevance of tumor suppressor genes and oncogenes. These objectives will be studied utilizing the tissues and peripheral blood samples obtained from the patients entered on this trial and funded by a grant to Dr. Robert Jenkins, Pathologist and Molecular Geneticist, Mayo Clinic, Rochester, MN 55905.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number	r: SWOG 9410 Status: Ongoing
Title: Doxorubicin Dose Escalation, w Adjuvant Chemotherapy Regimen for Node Intergroup Study	with or without Taxol as Part of the CA Positive Breast Cancer. A Phase III
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: <u>16 Oct 95</u>	ate· 0
Objective(s): 1) To determine whether adjuvant with cyclophosphamide in patie increase disease free and overall surviof Taxol as a single agent after the co	higher doses of doxorubicin used as arents with early breast cancer will

Objective(s): 1) To determine whether higher doses of doxorubicin used as an adjuvant with cyclophosphamide in patients with early breast cancer will increase disease free and overall survival. 2) To determine whether the use of Taxol as a single agent after the completion of four cycles of yclophosphamide and doxorubicin in combination will further improve disease-free and overall survival compared to cyclophosphamide and doxorubicin alone.

3) To determine whether treatment with Taxol will improve disease-free and overall survival regardless of the dose of cyclophosphamide and doxorubicin. More specifically, to determine if Taxol following standard dose cyclophosphamide and doxorubicin will be as effective or more effective than high dose cyclophosphamide and doxorubicin without Taxol. 4) To assess the toxicity of the different doses of cyclophosphamide and doxorubicin with and without Taxol using the end point of life threatening or lethal toxicity.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9412 Status: Ongoing

Title: Phase III Randomized Comparison of Maintenance Chemotherapy with Cyclophosphamide, Methotrexate, and 5-Fluorouracil vs High Dose Chemotherapy with Cyclophosphamide, Thiotepa, and Carboplatin and Autologous Bone Marrow Support for Women with Metastatic Breast Cancer who are Responding to Conventional Induction Chemotherapy

Estimated completion date:
Facility: Brooke Army Medical Center, Texas
Associate Investigator(s):
Estimated cumulative OMA cost:

Objective(s): 1) To compare the time to failure and overall survival in patients with metastatic breast cancer responsive to conventional-dose induction chemotherapy who are treated with high-dose chemotherapy and autologous bone marrow rescue to those treated with conventional-dose maintenance chemotherapy. 2) To compare the toxicity in patients treated with 4-6 cycles of conventional-dose chemotherapy followed by high-dose chemotherapy with autologous bone marrow rescue versus 4-6 cycles of conventional-dose induction chemotherapy followed by further conventional-dose maintenance chemotherapy. 3) To compare the relative economic costs of a prlonged course of conventional-dose chemotherapy to high-dose chemotherapy and autologous bone marrow rescue in patients with metastatic breast cancer.

Review results: <u>Continue</u>

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

Periodic review date: 16 Oct 95

Date: 16 Oct 95 Protocol Number:	SWOG 9413 Status: Ongoing
Title: Phase II Treatment with Etoposi and Interferon Alpha 2b (I), (ELFI) + G Pancreatic Adenocarcinoma	de (E), Leucovorin (L), 5 Fluorouracil
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	7
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repo Total number of subjects enrolled to da Periodic review date: <u>16 Oct 95</u> R	te: <u>0</u>
Objective(s):	
Technical Approach: Therapy will follo	ow the schema outlined in the protocol.
Progress: Study continues for patient	and data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9415 Status: Ongoing Title: Phase III Randomized Trial of 5-FU/Leucovorin/Levamisole as Adjuvant therapy for High-Risk Resectable Colon Cancer, an Intergroup. Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0Total number of subjects enrolled to date: _0 Periodic review date: 16 Oct 95 Review results: Continue Objective(s): To compare the effectiveness of bolus 5-FU, leucovorin,

levamisole vs continuous infusion 5-FU, levamisole as adjuvant therapy for patients with Stage B2, C1 or C2 colon cancer. This will be measured in terms of overall survival. Disease-free survival will be a secondary endpoint.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Study continues for patient and data accrual.

Date: 16 Oct 95 Protocol Number: SWOG 9416 Status: Ongoing Title: A Phase II Trial Induction Chemoradiotherapy Followed by Surgical Resection for Non-Small Cell Lung Cancer Involving the Superior Sulcus (Pancoast Tumors) Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 Review results: Continue Objective(s):

Technical Approach: Therapy will follow the schema outlined in the protocol.

Study continues for patient and data accrual.

Date: 16 Oct 95 Pr	otocol Number:	SWOG 9419 Stat	us: Ongoing
Title: Tumor Tissue biop with Colorectal Cancer, A	sy for Thymidy: ncillary	late Synthase Express	ion in Patients
Start date:		Estimated completio	n date:
Principal Investigator: Timothy J. O'Rourke, COL,	мс	Facility: Brooke Army Medical	Center, Texas
Department/Service: Medicine/Hematology/Oncolo	bay	Associate Investiga	
Key Words:			
Cumulative MEDCASE cost:		Estimated cumulative	e OMA cost:
Number of subjects enrolle Total number of subjects e Periodic review date: 16	prolled to date	o. 0	ue
Objective(s):			
Technical Approach: There	apy will follow	v the schema outlined	in the protocol
		and data accrual.	

Date: 16 Oct 95 Protocol Number	: SWOG 9420 Status: Ongoing
Title: Correlation of Intratumoral The Clinical Response to 5-Fluorouracil as Intermittent High-Dose Infusion in Patricancer	a Continuous Low-Dose Infusion or
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reportation of subjects enrolled to da Periodic review date: <u>16 Oct 95</u> R	te: <u>0</u>
Objective(s):	
Technical Approach: Therapy will foll	ow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number:	SWOG 9424 Status: Ongoing
Title: Phase II Trial of High Dose Tam Metastatic Non-Small Lung Cancer	oxifen Plus Cisplatin Chemotherapy in
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	:e: 0
Objective(s):	
Feedbright Ammerch Missey	

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number:	SWOG 9426 Status: Ongoing
Title: A Phase III Trial of Flutamide Flutamide have had Disease Progression	Withdrawal After Patients Taking on SWOG 8894
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	 Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	te: <u>0</u>
Objective(s): 1) To assess the proporti	on of response to flutamide withdrawa cactory prostate cancer previously

Objective(s): 1) To assess the proportion of response to flutamide withdrawal in patients with metastatic hormone-refractory prostate cancer previously treated on SWOG-8994. Response shall be determined by both PSA and traditional objective criteria. 2) To estimate the time to progression after flutamide withdrawal. 3) To evaluate the pretreatment variables that predict time to progression after flutamide withdrawal.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9428 Status: Ongoing Title: Evaluation of DNA Ploidy and p53 in Patient Registered to SWOG 8794

and SWOG 9024

Estimated completion date:
Facility: Brooke Army Medical Center, Texas
Associate Investigator(s):
- - -
Estimated cumulative OMA cost:

Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 _ Review results: <u>Continue</u>

Objective(s): 1) To evaluate the clinical usefulness of DNA ploidy information gained from a prostate biopsy prior to therapy by comparing it to the DNA of tumor obtained from the Stage C site (SWOG-8794), and as a predictor of outcome for patients undergoing primary radiation therapy and 5-FU treatment (SWOG-9024). 2) To compare DNA ploidy information as measured by flow cytometry (FCM) and quantitative fluorescence image analysis (QFIA). 3) To evaluate the ability of the tumor ploidy at the Stage C site to predict outcome in patients entered on <u>SWOG-8794</u>, in relationship to tumor progression or recurrence in those patients undergoing observation or receiving postoperative radiation therapy. 4) To evaluate p53 as a marker in the above prostate cancer patients by comparing the p53 information that is obtained by immunohistochemistry, flow cytometry, and single-strand conformational polymorphism (SSCP), and by analyzing the p53 information as a predictor of patient outcome in the following groups: a) patients being followed after radical prostatectomy; b) patients receiving radiation therapy after radical prostatectomy; c) patients undergoing 5-FU and radiation therapy as a primary treatment modality. 5) To evaluate the ploidy and p53 status of benign areas in the radical prostatectomy specimens as compared to that found in overt tumors.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Proto	col Number:	SWOG 9429	Status:	Ongoing
Title: Phase II Trial of Ca Poor-Risk Stage III Non-Smal			oncurrent R	adiation for
Start date:		Estimated com	pletion dat	e:
Principal Investigator: Timothy J. O'Rourke, COL, MC		Facility: Brooke Army M	edical Cent	er, Texas
Department/Service: Medicine/Hematology/Oncology		Associate Inv	estigator(s):
Key Words:				
Cumulative MEDCASE cost:		Estimated cum	ulative OMA	cost:
Number of subjects enrolled of Total number of subjects enro Periodic review date: <u>16 Oct</u>	olled to dat	:e: <u>0</u>		
Objective(s): 1) To assess t free survival of poor-risk pa carcinoma treated with concu	atients with	Stage III non-	-small cell	lung

assess the response rate and pattern of local and distant failure. 3) To assess the toxicity of this regimen in this group of poor-risk patients.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Study is closed to patient accrual, but is ongoing for follow-up of one patient remaining on study.

Date: 16 Oct 95 Protocol Number: SWOG 9432 Status: Ongoing Title: Induction Chemotherapy Followed by High Dose Chemoradiotherapy with Autologous Stem Cell Rescue for Patients with Newly Diagnosed Ki67 Positive Diffuse Aggressive Lymphoma, A BMT Study, Phase II Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: 16 Oct 95 ___ Review results: <u>Continue</u> Objective(s): 1) To evaluate in a group-wide setting the overall survival, failure-free survival, and response rates of patients with diffuse aggressive non-Hodgkin's lymphomas that are K167 positive (\leq 80%) who are treated with chemotherapy followed by transplant therapy. Transplant therapy is total body irradiation (TBI), high-dose etoposide, cyclophosphamide and peripheral blood

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

stem cell transplant (PBSCT).

Date: 16 Oct 95 Protocol Number:	SWOG 9438 Status: Ongoing
Title: Phase III total Body Irradiatio Autologous Peripheral Blood Stem Cell T Randomization to Therapy with Interleuk with Non-Hodgkin's Lymphoma. A BMT Stu	ransplantation Followed by in-2 Versus Observation for Patients
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: 16 Oct 95 Re	te: <u>0</u>
Objective(s): 1) To compare the survival patients with non-Hodgkin's lymphoma treat Interleukin-2 (IL-2) or no further treat body irradiation (TBI), high-dose etopose blood stem cell transplant (PBSCT).	eated with post-transplant therapy wit ment. Transplant therapy is total

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9442 Status: Ongoing

Title: A Randomized Multi-Institutional Phase III Trial of BEP and High-Dose Chemotherapy Versus BEP Alone in Previously Untreated Patients with Poor Risk Germ Cell Tumors

Estimated completion date:
Facility: Brooke Army Medical Center, Texas
Associate Investigator(s):

Estimated cumulative OMA cost:

Total number of subjects enrolled to date: 0

Periodic review date: 16 Oct 95 Review results: Continue

Objective(s): 1) To compare the efficacy of two cycles of bleomycin,

objective(s): 1) To compare the efficacy of two cycles of bleomycin, etoposide, and cisplatin (BEP) Plus two cycles of high dose carboplatin, etoposide and cyclophosphamide with autologous bone marrow transplant (AuBMT) or stem cell infusion) to four cycles of BEP alone in previously untreated germ cell tumor (GCT) patients with poor risk features. 2) To compare the toxicity associated with early dose intensification with high dose chemotherapy and AuBMT/stem cells compared with standard chemotherapy of four cycles of BEP in previously untreated poor risk GCT patients. 3) To prospectively evaluate the rate of decline of serum tumor markers, human chorionic gonadotrophin (HCG) and alphafetoprotein (AFP) of patients in both arms of the study for use as post-treatment prognostic indicators. These will be correlated with complete response and survival.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 16 Oct 95 Protocol Number: SWOG 9445 Status: Ongoing Title: Prognostic Factor panel to Predict Preferred Therapy for Node Positive Postmenopausal Breast Cancer Patients (AF vs. Tamoxifen) (A Companion Protocol to SWOG 8814 [INT-0100, CALGB-9194, EST-4188, NCCTG-883051, NCIC-MA.9]) Start date: Estimated completion date: Principal Investigator: Facility: Timothy J. O'Rourke, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Medicine/Hematology/Oncology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0

Objective(s): The overall objective of this study is to correlate a panel of markers with clinical outcome and responsiveness to adjuvant therapy of node positive post menopausal breast cancer patients who participated in southwest Oncology Group protocol SWOG 8814. The most important initial objective is to confirm the results of CALGB study, CALGB-8541, which suggested that c-erbB-2 expression (as detected by immunohistochemistry) is a strong predictor of the efficacy of CAF-based adjuvant chemotherapy.

Technical Approach: Therapy will follow the schema outlined in the protocol.

Progress: Study continues for patient and data accrual.

Periodic review date: <u>16 Oct 95</u> Review results: <u>Continue</u>

Total number of subjects enrolled to date: 0

Date: 16 Oct 95 Protocol Number:	SWOG 9450 Status: Ongoing
Title: Prostate Cancer Intervention Ve	rsus Observation Trial
Start date:	Estimated completion date:
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	ce: <u>0</u>
Objective(s): 1) To determine the effect of mortality. 2) To determine the effect of effect on disease recurrences. 4) The determinants of prostate cancer progress	on health status. 3) To determine the progression-free survival, the
Technical Approach: Therapy will follo	ow the schema outlined in the protocol
Progress: Study continues for patient	and data accrual.

Date: 16 Oct 95 Protocol Number:	SWOG 9501 Status: Ongoing	
Title: A Phase II Trial of Fludarabine Non-Hodgkin's Lymphoma	and Mitoxantrone (FN) for Treatment of	
Start date:	Estimated completion date:	
Principal Investigator: Timothy J. O'Rourke, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Medicine/Hematology/Oncology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>16 Oct 95</u> Re	e: 0	
Objective(s): 1) Estimate the two-year progression-free survival rate in patients with previously untreated low-grade non-Hodgkin's lymphoma treated with fludarabine and mitoxantrone. 2) To evaluate the toxicity of fludarabine and mitoxantrone in this group of patients.		

Technical Approach: Therapy will follow the schema outlined in the protocol.

Date: 15 Dec 95 Protocol Num	nber: POG 7799 Status: Ongoing
Title: Rare Tumor Registry for Child	oligoriig
Start date: 25 Sep 81	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: Re	
Objective(s): 1) To collect natural his so rarely that large series of patients institution.	
To evaluate therapies in those group of cases can be accrued.	os of rare tumors in which fair numbers
Technical Approach: Any child under th rare solid tumor is eligible for the st	e age of 18 years at diagnosis with a

Progress: Recommend we keep study open. No new patients this year.

rare solid tumor is eligible for the study.

Date: 15 Dec 95 Protocol Number	r: POG 8104 Status: Ongoing
Title: Comprehensive Care of the Child Oriented Study, Phase III.	d with Neuroblastoma: A Stage and Age
Start date: 27 Jan 83	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words: Neuroblastoma	1
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	ra. Q
Objective(s): 1) To treat the tumor accumor was diagnosed.	
 To reduce later complications by sepath that require surgery only; surgery and candraged radiation therapy. 	erating by age and stage those patients themotherapy; surgery, chemotherapy,
Fechnical Approach: Therapy will follow	the schema outlined in the study

Progress: Study closed to new patient accrual. Three patients remain on followup with no problems. Study remains open for followup of patients.

Date. 13 Dec 93 Protocol Number	: POG 8340 Status: Ongoing
Title: Allogenic or Autologous Bone Neuroblastoma: A POG Pilot Study.	Marrow Transplantation (BMT) for Stage I
Start date: 12 Aug 85	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center
Department/Service: Department of Pediatrics	Absociate Investigator(s): Reginald Moore, LTC, MC Barbara Reeb
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reproted number of subjects enrolled to operiodic review date:	porting period: 0 date: 22 Review results: Closed to new entries
	sponse rate and duration of national

Objective(s): 1) To determine the response rate and duration of patients aged > 1 year with metastatic (Stage D) neuroblastoma to intensive chemotherapy and fractionated total body irradiation followed by allogeneic or autologous bone marrow transplantation (BMT) performed ln first clinical remission.

- 2) To determine the response rate and duration using the same regimen in patients with Stage D neuroblastoma who fail to respond to, or recur after, conventional chemotherapy.
- 3) To determine the toxicity of the above regimen.

Technical Approach: This pilot study tests the efficacy and toxicity of high dose melphalan and fractionated total body irradiation supported by allogeneic or autologous BMT for neuroblastoma in first clinical remission or following relapse.

Bone marrow aspiration and therapy will follow the schema outlined in the study protocol.

Progress: Study remains open for followup of patients only.

Date: 15 Dec 95 Protocol Number: POG 8600/01/02 Status: Ongoing Title: Evaluation of Treatment Regimens in Acute Lymphoid Leukemia in Childhood (AlinC #14) - A Pediatric Oncology Group Phase III Study. Start date: 28 Mar 86 Est Comp Date: Principal Investigator: Facility: Terry E. Pick, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Department of Pediatrics Reginald Moore, LTC, MC Key Words: Leukemia, Lymphoid Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 10 Periodic review date: _ Review results: Open/followup only Objective(s): 1) To test the concept that intensive asparaginase (ASP) therapy designed to maintain low asparagine levels for the first six months of maintenance will improve the outcome of patients with standard risk acute lymphocytic leukemia (ALL) when added to pulses of intermediate dose methotrexate (MTX) as compared to intensification with IDM alone. 2) To study the effectiveness in standard risk patients of intensification with a potentially synergistic or additive drug pair, i.e. IDM plus AraC, as compared to that of intensification with IDM pulses alone. 3) To determine if administering a pulse of IDM + AraC at 3 week intervals during the first 4 months of complete remission in children with ALL is superior to administering the same number of IDM + AraC pulse at 23-week intervals during the first 2 years of complete remission in children with ALL with either "lower" or "higher" risk of relapse. 4) To obtain further information on the immediate and delayed toxicity of the continuation of chemotherapy program that incorporates these combinations of MTX and AraC or MTX and ASP in moderately high doses. Technical Approach: Therapy will follow the schema outlined in the study protocol. Progress: Study closed to new patient entry. Continue followup of patients.

	: POG 8625/26 Status: Ongoing
IIIA, Hodgkin's Disease in Pediatric P	y in the Treatment of Stages I, IIA, an
Start date: 30 Jul 86	Est Comp date: 01 Sep 92
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words: Hodgkin's	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reported in number of subjects enrolled to da	
Periodic review date: Re	view results: Continue
Objective(s): 1) To compare the effect cycles of MOPP/ABVD plus low dose radia emission and eventual survival (with o	iveness of 3 cycles of MOPP/ABVD vs 2

remission and eventual survival (with one cycle = 1 course MOPP and 1 course of ABVD) in children with early stage Hodgkin's disease.

- 2) To compare the incidence and severity of acute/long-term toxicity of MOPP/ABVD vs MOPP/ABVD plus involved field, low dose radiation therapy.
- 3) To evaluate the incidence of CR after 2 cycles of MOPP/ABVD.
- 4) To search for prognostic factors that may correlate with duration of
- 5) To determine the salvage rate of patients who fail to respond to 2 cycles of MOPP/ABVD or who fail to achieve a CR after completion of prescribed

Technical Approach: Therapy will follow the schema outlined in the study

Progress: Study closed to new patient entry. Open for followup only.

Date: 15 Dec 95 Protocol Numb	per: POG 8650 Status: Ongoing
Title: National Wilms Tumor Study - 4	: Stage I/Favorable or Anaplastic
Start date: 19 Dec 86	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words: Wilms tumor	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reprotect to a number of subjects enrolled to a Periodic review date:	late: <u>3</u>
Objective(s): To gain a better unders gathering detailed information regards to correlate this information with tre	ing gross and histologic morphology and
Technical Approach: Patients will be	randomized according to stage and

Technical Approach: Patients will be randomized according to stage and histology.

Therapy will follow the schema outlined in the study protocol.

Progress: Study is closed to new patient entry. A total of five have been entered and are being followed.

Date: 15 Dec 95 Protocol Number	: POG 8691 Status: Ongoing
Title: T-Cell #3 Pilot Study.	
Start date: 30 Jul 86	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: 3
Objective(s): 1) To determine the toxic the administration of this intensive che I-cell leukemia and advanced state T-cel	motherapy regimen to children with
2) To determine the feasibility of using cackbone of a randomized groupwide T-cel L-asparaginase therapy.	this chemotherapy regimen as the l study evaluating intensive
Technical Approach: Therapy will follow protocol.	the schema outlined in the study
Progress: No new patients entered on stourposes only.	udy. Study remains open for followup

Date: 15 Dec 95 Protocol Number	: POG 8704 Status: Ongoing		
Title: T-Cell #3 Protocol - A POG Phas	e III Study.		
Start date: 3 Sep 87	Estimated completion date:		
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC		
Key Words:			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:		
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	:e: <u>0</u>		
Objective(s): 1) To estimate the diseast chemotherapy regimen designed to be part T-cell derived lymphoid malignancies in lymphoblastic lymphoma and T-cell acute	cicularly effective for patients with children with advanced stage		
2) To determine the efficacy of adding i the backbone chemotherapy regimen in an survival.	ntensive high-dose L-asparaginase to attempt to improve disease-free		
Technical Approach: Patients <21 years ALL, or patients age <21 years with a di be eligible.	and >12 months with a diagnosis of agnosis of lymphoblastic lymphoma wil		

Progress: Study closed. However, two patients are currently being followed.

Therapy will follow the schema outlined in the study protocol.

Date: 15 Dec 95	Protocol Numi	per: POG 8725	Status: Ongoing
Title: Randomized Stud Total Nodal Radiation : IV Hodgkin's Disease in	dy of Intensive Therapy in the T Pediatric Pati	Chemotherapy (MOP Treatment of Stage Lents.	P/ABVD) +/- Low Dose s IIB, IIIA, IIIB, an
Start date: 29 Jul 88		Estimated comp	letion date:
Principal Investigator: Terry E. Pick, COL, MC		Facility:	dical Center, Texas
Department/Service: Department of Pediatric	s	Associate Inves	stigator(s):
Key Words:		- 	
Cumulative MEDCASE cost	:	Estimated cumul	ative OMA cost:
Number of subjects enrol Total number of subjects Periodic review date:	: POTOLIDA FA Ja	.	
Objective(s): To determ low dose total nodal rad Hodgkin's disease who ha courses of MOPP alternat of complete remission an Chemotherapy alone.	ve achieved a co	omplete remission	c patients with after receiving 4
o determine whether TNR ong-term morbidity when	F will signification compared to MOI	antly increase eit PP/ABVD alone.	her acute toxicity or

long-term morbidity when compared to MOPP/ABVD alone.

To determine the effect of chemotherapy as compared to chemotherapy plus TNRT on splenic function as determined by the pitted erythrocyte count using Nomarski optics.

Technical Approach: Therapy will follow the schema outlined in the study

Progress: Study closed to new patient entry. Two patients still in followup.

Date: 15 Dec 95	Protocol 1	Number:	POG 87	741/42	Status:	Ongoir	ıg
Title: Stage D NBL #3: Days at Diagnosis.	Treatment	of Stag	e D Neu	roblast	oma in Ch	ildren	>365
Start date: 3 Sep 87			Estimat	ed comp	letion da	te:	
Principal Investigator: Terry E. Pick, COL, MC			Facilit Brooke		lical Cen	ter, Te	xas
Department/Service: Department of Pediatrics	5		Associa Reginal	te Inves d Moore,	stigator(LTC, MC	s):	
Key Words:							
		<u> </u>					
Cumulative MEDCASE cost:		I	Sstimate	ed cumul	ative OM	A cost:	
Number of subjects enrol Total number of subjects	enrolled 1	o date:	2				
Periodic review date:		Revie	w resul	ts: <u>Cl</u>	osed to r	ew pts	
Objective(s): To evaluate administered Phase II characteristic patients >365 The specific agents to be dichloro-transdihydroxy-leading.	emotherapy days of ag studied a	agents ye with	when gi Stage D	ven prid	or to contatic) ne	vention	al
Technical Approach: Any neuroblastoma who is >365 previous chemotherapy or will be eligible.	davs and	< 71 trans	re of a	~~~	1	•	
Therapy will follow the s	chema outl	ined in	the st	udy prot	ocol.		
Progress: Study now clos followup.	ed for pat	ient aco	rual.	Two pat	ients cu	rrent i	n

Date: 15 Dec 95	Protocol Numbe	r: POG 8743	Status: Ongoing	
Title: Treatment in 'Be POG Stage C, D, and DS	etter Risk' Neu (VS) <365 Days.	roblastoma: POG	Stage B (All Ages) ar	
Start date: 3 Sep 87		Estimated co	mpletion date:	
Principal Investigator: Terry E. Pick, COL, MC		Facility: Brooke Army	Medical Center, Texas	
Department/Service: Department of Pediatrics	3	Associate Investigator(s): Reginald Moore, LTC, MC		
Key Words:		- 		
Cumulative MEDCASE cost:		 Estimated cum	nulative OMA cost:	
Number of subjects enrol Total number of subjects Periodic review date:	enrolled to da	te· 1		
Objective(s): 1) To prodiagnosis who will fail the Adriamycin (ADR) and delated and evaluate the CR and scis-platinum (CDDP) and N	spectively iden to achieve CR was ayed surgery; the survival rates	tify patients <	365 days of age at amide (CYC) and	
2) To evaluate the diseas of patients currently conneuroblastoma.	se-free survivalusidered to be	l (DFS) and sur "better risk" p	vival in a larger grou atients with	
Technical Approach: Patioutlined in the study pro	ent eligibility	and therapy w	ill follow the schema	
Progress: One patient co Although the study has be follow-up.	ntinues on foll en closed to ne	owup with no enew entries, it is	vidence of disease. cemains open for	

Date: 15 Dec 95 Protocol Numbe	r: POG 8820 Status: Ongoing		
Title: VP-16, AMSA+/l 5 Azacytidine in	Refractory ANLL, Phase II/III.		
Start date: 13 Mar 89	Estimated completion date:		
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC		
Key Words:			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:		
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	e: 2		
Objective(s): 1) to compare, in a rando VP-16/AMSA versus VP-16/AMSA/5-AZA in ch acute non-lymphocytic leukemia (ANLL).	mized study, the remission rate of ildren with recurrent or refractory		
2) To determine the duration of remissio regimen as continuation therapy.	n, using pulses of the induction		
3) To study the relative toxicities of t	hese two therapies.		
Technical Approach: Patients < 21 years who have either failed to respond to ind relapse are eligible for this study. The study protocol	uction therapy or who are in first		

Progress: Study remains ongoing for patient followup. Two patients are being

followed.

Date: 15 Dec 95 Protocol 1	Number: POG 8821 Status: Ongoing
Title: AML#3 Intensive Multiagent Transplant Early in 1st CR for Chi	Therapy vs Autologous Bone Marrow ldren with Acute Myelocytic Leukemia.
Start date: 29 Jul 88	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled t Periodic review date:	o date: 9
Survival (EFS) in childhood acute m	ease-free survival (DFS) and event-free yelocytic leukemia (AML) offered by ting non-cross resistant drug combinations
To determine if short (three course) first three courses of the above rectransplant (BMT) using the Busulfan, 4-hydroxycyclophosphamide (4-HC) pur	intensive chemotherapy (identical to the gimen) followed by autologous bone marrow (Cytoxan preparative regimen and eged marrow is effective therapy.
To compare, in a randomized study, to correlate the treatment outcome with	the results of the above 2 regimens and to clinical and laboratory features.
Technical Approach: Patient eligibi	lity and therapy will follow the schema

Progress: Study closed to new patient entry. Four patients alive and being

outlined in the study protocol.

followed.

Date:	15 Dec 95	Protocol	Number	: POG 8	3823	Status:	Comple	eted
Title:	Recombinant Alph	a-Interfer	on in C	nildhood	d Myeloge:	nous Leu	kemia,	Phase
Start d	late: 10 Jul 89		1	Estimate	ed comple	tion dat	e:	
_	oal Investigator: C. Pick, COL, MC		· ·	Tacility Brooke A	r: army Medio	cal Cent	er, Tex	kas
_	ent/Service: ent of Pediatrics				e Invest:	_):	
Key Wor	ds:							
Cumulat	ive MEDCASE cost:		I	stimate	d cumulat	tive OMA	cost:	
Total n	of subjects enrol umber of subjects c review date:	enrolled t	to date:	0				
Objecti	ve(s): To determ	ine toxicit	ty, resp	onse ra	te and du	ration o	of resp	onse

Objective(s): To determine toxicity, response rate and duration of response to therapy with recombinant alpha interferon for newly diagnosed myelogenous leukemia (ACML) in chronic phase, and for "juvenile" chronic myelogenous leukemia (JCML) occurring within the first two decades.

Technical Approach: Eligible patients must have been < 21 years of age at the time of initial diagnosis and must not have received prior anti-neoplastic therapy. Therapy will follow the schema outlined in the study protocol.

Progress: Study is closed. No patients entered this year.

Date: 15 Dec 95 Protocol Num	ber: POG 8828 Status: Ongoing
Title: Late Effects of Treatment of	Hodgkin's Disease, Non-therapeutic Stud
Start date: 12 Jun 89	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during rep Total number of subjects enrolled to d Periodic review date: R	2TA:
Objective(s): To estimate the inciden	ce of various late effects seen in
Technical Approach: All patients regis Hodgkin's disease therapeutic studies I of this study will be eligible and must patient or parent/guardian refuses.	stered on front-line phase III POG POG 8625 and POG 8725 after the opening t be registered on this study unless the
Progress: Study remains open for patie	ent accrual. No patients entered to

Date: 15 Dec 95 Protocol Numbe	r: POG 8829 Status: Ongoing			
Title: A Case Control Study of Hodgkin Nontherapeutic Study.	's Disease in Childhood - A			
Start date: 10 Jul 89	Estimated completion date:			
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC			
Key Words:				
ulative MEDCASE cost:	Estimated cumulative OMA cost:			
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	:e: <u>0</u>			
Objective(s): To conduct first intervie Hodgkin's disease to learn more about th	ew case-control study of childhood ne epidemiology of the disease in			

Technical Approach: All pediatric oncology patients, less than 15 years of age with a newly confirmed diagnosis of Hodgkin's disease are eligible. Telephone interview and administration of questionnaire will be conducted.

Progress: Study remains open. No patients entered.

Date: 15 Dec 95 Protocol Numb	per: POG 8844 Status: Completed
Title: Stage D Neuroblastoma #4: Bone Children > 365 Days at Diagnosis with	e Marrow Transplant in the Treatment of Stage D Neuroblastoma.
Start date: 12 Dec 88	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: Re	ate· 3
beage b neuroblastoma who are treated a	conventional therapy and who have good

2) To evaluate the toxicities associated with this protocol.

Technical Approach: Patients >365 days and <21 years at diagnosis previously registered on POG 8741/42 who have completed post-induction evaluation and post induction surgery are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: Study now closed to new patient entry. A total of three patients entered on study and are being followed.

Date:	15 Dec 95	Protocol N	umber:	POG	8850	Status:	Ongoing	
Dactino	Evaluation of Vi mycin With or With nt of Patients With todermal Tumor of	thout the Addith Newly Dia	dition agnose	of I	fosfamide	and Etopo	side in t	-he
Start d	ate: 13 Mar 89]]	Estima	ated compl	etion dat	e:	
_	al Investigator: . Pick, COL, MC		•	Facili Brooke	ity: > Army Med	ical Cent	er, Texas	_
_	ent/Service: ent of Pediatrics	5	•		iate Inves ald Moore,	_	:):	_
Key Word	ds:							
Cumulati	ive MEDCASE cost:		F	Stima	ited cumul	ative OMA	cost:	_
Total nu	of subjects enrolumber of subjects review date:	enrolled to	date:	1		osed to n	ew pts	<u>-</u>
Obiectiv	ve(s): To determ	ine the even	nt-free	surv	rival and	survival	of patien	- te

Objective(s): To determine the event-free survival and survival of patients with Ewing's sarcoma and PNET of the bone who are treated with etoposide and ifosfamide in combination with standard therapy, and to compare their EFS and survival rates with those of patients treated with standard therapy alone.

Technical Approach: Patients <30 years of age with newly diagnosed Ewing's sarcoma and PNET of bone, or a diagnosis compatible with primitive sarcoma of bone are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: Study closed to new patient entry. One patient in followup.

Date: 15 Dec 95 Protocol Number	er: POG 8930 Status: Ongoing
Title: A Comprehensive Genetic Analys	sis of Brain Tumors.
Start date: 10 Jul 89	Estimated completion date:
Principal Investigator: Terry A. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: Re	ate: 0
Objective(s): To determine prospective abnormalities of cellular DNA content, determine the clinical implications of brain tumors.	ely the clinical significance of
Technical Approach: Any patient with a	brain tumor who has had tumor tissue

submitted for study and who is subsequently registered on a POG frontline therapeutic protocol is eligible for this study.

Progress: Study remains open for patient entry.

Date: 15 Dec 95	Protocol Number	er: POG 9000 Status: Ongoing
Title: Alinc 15 La Leukemia.	boratory Classificat	tion Protocol for Acute Lymphoblastic
Start date: 17 Dec	90	Estimated completion date:
Principal Investigation E. Pick, COL,		Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediat	crics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:		1
Cumulative MEDCASE of	ost:	Estimated cumulative OMA cost:
Number of subjects e Total number of subj Periodic review date	ects enrolled to dat	rting period: 3 te: 13 view results: Study remains open
Objective(s): To de treatment.	termine the specific	subtype of leukemia in order to plan
Technical Approach: followed by specific	All eligible patient blood studies as ou	nts will undergo bone marrow aspiration at the study protocol.
Progress: Study remains entered-13.	ains open. Three pa	atients entered this year. Total

Date: 15 Dec 95 Protocol Number	: POG 9005 Status: Ongoing
Title: Alinc 15: Dose Intensification for ALL in Childhood.	of Methotrexate and 6-Mercaptopurine
Start date: 18 Dec 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	re. q
Objective(s): To determine, in a random with intermediate-dose methotrexate (ID (IV 6-MP) is superior or inferior to rep (LDMTX) and IV 6-MP for prevention of remission and at lower risk for relapse.	MTX), and intravenous 6-mercaptopurine eated low-dose, oral methotrexate
Technical Approach: Therapy will follow protocol.	the schema outlined in the study
Progress: Study closed except for follo entered. Total patients entered: 9.	wup purposes. Four new patients

Date: 15 Dec 95 Protocol Number	: POG 9006 Status: Ongoing
Title: Alinc 15: Up-Front 6-MP/MTX vs Acute Lymphocytic Leukemia in Childhood	Up-Front Alternating chemotherapy for
Start date: 18 Dec 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: <u>4</u>
Objective(s): To compare, in a randomize higher risk for relapse, the efficacy are courses of IV methotrexate (TMX) plus IV early intensive courses of alternating in (6-MP/MTX), VM-26/Ara-C, Vincristine/pred Ara-C.	nd toxicity of A: 12 early intensive 7 6-mercaptopurine (6-MP) vs B: 12 1. Intensive chemotherapy combinations

Technical Approach: Randomization and therapy will follow the schema outlined in the study protocol.

Progress: One new patient entered on study this year. Study remains open for patient accrual and followup.

	_						
Date:	15 Dec	95	Protocol	Number:	POG 9031	Status:	Ongoina
							33

Title: Treatment of Children with High-Stage Medulloblastoma: Cisplatin/VP-16

Pre- vs Post-Irradiation.

Start date: 24 Aug 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	 Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to data Periodic review date: Rev	te: 1

Objective(s): 1) To compare the 2-year event-free survival (EFS) of children with newly-diagnosed high-risk medulloblastoma who are treated with cisplatin and VP-16 pre-irradiation vs post-irradiation.

- 2) To define the toxicity and activity of pre- and post-irradiation cisplatin/ VP-16 in patients with newly-diagnosed high-risk medulloblastoma.
- 3) To determine whether achievement of a measurable tumor response (PR and CR) to pre-irradiation cisplatin/VP-16 has prognostic significance for children with high-risk medulloblastoma, compared with failure to achieve a measurable (SD or PD).

Technical Approach: Patients age > 3 years and < 21 years registered within 4 weeks of initial diagnostic surgery or biopsy are eligible.

Therapy will follow the schema outlined in the study protocol.

Progress: Study remains open. One patient remains in followup.

Date: 15 Dec 95 Protocol Numbe	r: POG 9046 Status: Ongoing
Title: Molecular Genetic Study of Wilm	s' Tumor and Nephrogenic Rests.
Start date: 31 May 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: <u>3</u>
Objective(s): 1) To define the patterns constitutional chromosomal heterozygosit and associated nephrogenic rests (nephroly). To correlate these patterns with clir thereby, to propose a new model of patholy). To physically localize gene mutations specific categories of Wilms' tumors on arm of chromosome 11. 4) To clone genes associated with Wilms' 5) To establish a bank of molecularly are tumors with matched constitutional tissue.	cy in a large series of Wilms' tumors oblastomatosis). Dicopathologic findings, to be able, ogenesis for Wilms' tumor. Es and chromosome abnormalities from a long-range physical map of the short tumor. The dottogenetically characterized Wilms

Technical Approach: Any patient < 16 years of age, with a previously untreated histologically proven Wilms' tumor of any histologic subtype or a mesoblastic nephroma, who has had tumor tissue and blood submitted for study, is eligible. Patients diagnosed prior to the opening of this study are also eligible if both unfixed, frozen pre-treatment tumor and a source of constitutional DNA are available.

Study procedures are outlined in the protocol.

Progress: Study remains open. Three patients entered on study.

Date: 15 Dec 95 Protocol Number	er: POG 9047 Status: Ongoing
Title: Neuroblastoma Biology Protocol.	
Start date: 31 May 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	1
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: 5
Objective(s): 1) To analyze the DNA corcytometry.	ntent of neuroblastoma cells by flow

- 2) To characterize neuroblastoma tumor DNA from POG patients genetically by analysis of N-myc amplification and LOH chromosome 1p.
- 3) To determine the independent clinical significance of these and other genetic rearrangements compared to more conventional clinical, histologic, and biological variables in predicting either response to treatment or outcome.
- 4) To develop a reference bank of genetically characterized tumor tissue and DNA that would be available for other current, planned, and future studies of neuroblastoma biology.

Technical Approach: Tumor tissue submitted from diagnostic biopsies or marrow aspirations will be cryopreserved for biologic studies. Eligibility requirements of active neuroblastoma therapeutic studies will require that all patients be concomitantly registered on this study.

Flow cytometry and N-myc studies will be done as outlined in the study protocol.

Progress: Study remains open. A total of five patients entered on study.

Date: 15 Dec 95 Protoco	ol Number: POG 9048 Status: Ongoing	
Title: Treatment of Children verbase II Study.	with Localized Malignant Germ Cell Tumors: A	
Start date:	Estimated completion date:	
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: 0 Periodic review date: Review results:		

Objective(s): 1) To determine whether > 85% of patients with immature teratomas or Stage I malignant testicular germ cell tumors will have long-term event-free survival when treated with surgery alone, and to estimate a time after which disease recurrence for these patients is very unlikely.

- 2) To determine whether a long-term event-free survival of > 85% can be achieved for children with stage II malignant testicular germ cell tumors and Stage I a II ovarian germ cell tumors who are treated with four courses of chemotherapy with cisplatin, etoposide, and bleomycin.
- 3) To evaluate the prognostic significance of histology, site, and size of the primary lesion(s); extension of disease into local tissues; and extent of lymph node involvement.
- 4) To determine whether initial levels and subsequent changes in tumor markers, specifically alpha-fetoprotein, beta-human chorionic gonadotropin, and LDH, correlate with initial response, ultimate outcome, and disease recurrence.

Technical Approach: Eligible patients must have primary germ cell tumors of the testes or ovaries, which are histologically verified to be yolk-sac tumor, embryonal carcinoma, choriocarcinoma, immature teratoma, or teratoma with malignant elements. Therapy will follow the schema outlined in the study protocol.

Progress: Study remains open. No patients enrolled to date.

Date: 15 Dec 95 Protocol 1	Number: POG 9049 Status: Ongoing
Title: Study of High-Risk Malig	gnant Germ Cell Tumors in Children.
Start date: 31 May 90	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during the subjects enrolled Periodic review date:	ng reporting Period: 0 d to date: 0 Review results:
Objective(s): 1) To compare the	efficacy with respect to survival and event

Objective(s): 1) To compare the efficacy with respect to survival and event-free survival of two chemotherapeutic regimens high-dose cisplatin, etoposide, and bleomycin or standard-dose cisplatin, etoposide, and bleomycin in the treatment of children with high-risk malignant germ cell tumors.

2) To evaluate the prognostic significance of histology, site, and size of the primary lesion(s), sites of metastasis, and extent of lymph node involvement.

3) To determine whether initial levels and subsequent changes in tumor markers correlate with initial response, ultimate outcome, and the risk of disease progression.

Technical Approach: Patients age < 21 years with histologically verified yolk-sac tumor, embryonal carcinoma, choriocarcinoma, dysgerminoma (seminoma), or teratoma with mixed malignant elements are eligible. Chemotherapy must begin within 2 working days of randomization and within 21 days of the most recent diagnostic surgical procedure.

Therapy will follow the schema outlined in the study protocol.

Progress: Study remains open. No patients have been entered on this study.

Date:

15 Dec 95 Protocol Number: POG 9061 Status: Completed Title: The Treatment of Isolated Central Nervous System Leukemia. Start date: 31 Aug 90 Estimated completion date: Principal Investigator: Facility: Terry E. Pick, COL, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Department of Pediatrics Reginald Moore, LTC, MC Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 0 Total number of subjects enrolled to date: _0 Periodic review date: ___ Review results: Objective(s): 1) To determine the efficacy and toxicity of intensified

systemic treatment with delayed craniospinal irradiation for children with acute lymphoblastic leukemia and isolated central nervous system disease.

- 2) To describe the pharmacokinetics and cytotoxic effect within the cerebrospinal fluid (CSF) of intravenous 6-mercaptopurine (6-MP) given as a single agent in an "up-front" window and to determine the level at which 100% of the blasts are cleared from the CSF.
- 3) To measure parameters of CNS tissue injury and associate these with the effects of CNS leukemia and treatments.

Technical Approach: Patients with a diagnosis of ALL in first bone marrow remission with isolated, initial CNS relapse are eligible. Patients must be > 1 year of age at time of CNS relapse and must not have had prior brain irradiation.

Therapy will follow the schema outlined in the study protocol.

Progress: Study is completed. No patients have been entered into this study.

Date:	15 Dec 95	Protocol Numbe	r: POG 9079	Status: Ongoing		
Title: for Re	Pilot Study, H current/Progress	igh-Dose Melphal ive Malignant Br	an and Cyclophosp ain Tumors	ohamide with ABM Rescue		
Start	date: 16 Mar 92		Estimated comp	letion date:		
Princip Terry	pal Investigator E. Pick, COL, MC	:	Facility:	dical Center, Texas		
Department/Service: Department of Pediatrics				Associate Investigator(s): Reginald Moore, LTC, MC		
Key Wo	rds:		- 			
Cumulat	cive MEDCASE cost	::	 Estimated cumu	lative OMA cost:		
IUCal I	immer or smplect	s enrolled to da	ite: 3			
Objecti and cyc recurre cycloph when co	ve(s): 1) To de lophosphamide fo nt/progressive b osphamide that r mbined with melp e to recovery.	termine the acut llowed by ABM re rain tumors. 2) esults in maximu halan. 3) To de	e and delayed too scue in patients To establish the m tolerated non-h	xicities of melphalan		
Technicathe student	al Approach: Bo	ne marrow harves	ting will be carr	ried out as outlined in		
Progress entered	s: Study closed for a total of	to new patient three pa	enrollment. Two tients in followu	additional patients		

Date: 15 Dec 95 Pr	rotocol Number: POG 9107 Status: Completed
Title: Infant Leukemia Pr	rotocol.
Start date: 18 Mar 91	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Total number of subjects en	during reporting period: 0 rolled to date: 0 Review results:
intensive post-induction chehigh-dose Ara-C/DNR, IV 6-Mi	ine the toxicity associated with one year of emotherapy consisting of rotating courses of P/MTX, VP-16/Ara-C, vincristine/prednisone/ents < 12 months of age with acute lymphatic
	ce, severity, and duration of neutropenia, a associated with each of the above courses.
	mic toxicities (infections, nutritional, etc.) ive one-year post-induction chemotherapy.
	lity of using this regimen in a groupwide phase II: months of age with acute lymphatic leukemia.
Technical Approach: Therapy protocol.	y will follow the schema outlined in the study
Progress: Study closed. No	o patients enrolled to date.

Date: 15 Dec 95 Protocol 1	Number: POG 9130 Status: Ongoing
Title: Treatment of Newly-Diagnose	ed Low Grade Astrocytomas, A Phase III Study
Start date: 27 Jan 92	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled t Periodic review date:	o date:
Objective(s): 1) To determine the diagnosed low-grade astrocytomas of role of surgical resection in newly brain in childhood. 3) To determine progression-free survival following	beneficial effects of irradiation in newly

diagnosed low-grade astrocytomas of the brain in childhood. 2) To define the role of surgical resection in newly diagnosed low-grade astrocytomas of the brain in childhood. 3) To determine if adjuvant radiation therapy improves progression-free survival following incomplete surgical resection in children 5-21 years old with newly diagnosed low-grade astrocytomas of the brain. To document the natural history of newly diagnosed low-grade astrocytomas of the brain in patients receiving radical surgical resection as the sole treatment modality. 5) To determine and compare the late effects and neuropsychological sequelae of the various treatments in a large group of children with slow growing brain tumors likely to have long-term progression-free survival or cure.

Technical Approach: All eligible patient will receive treatment as outlined in the study protocol.

Progress: Study remains open for patient enrollment. One patient entered and on followup.

Date: 15 Dec 95 Protocol N	umber: POG 9132 Status: Completed
Title: Hyperfractionated Irradiati	on for Posterior Fossa Ependymoma, A Phase
Start date: 16 Mar 92	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during a Total number of subjects enrolled to Periodic review date:	reporting period:
Objective(s): 1) To determine the f	feasibility of using hyperfractionated

Objective(s): 1) To determine the feasibility of using hyperfractionated irradiation to the posterior fossa and upper cervical canal to treat newly-diagnosed patients with posterior fossa ependymoma, and to determine the toxicity of this treatment. 2) To evaluate the response of children with incompletely-resected posterior fossa ependymoma to hyperfractionated irradiation. 3) To estimate the disease control interval and pattern of failure of children with posterior fossa ependymoma following treatment with surgery and hyperfractionated irradiation.

Technical Approach: All eligible patients will receive therapy as outlined in the study protocol.

Progress: Study completed. There are no patients on followup.

Date: 15 Dec 95	Protocol Numbe	r. DOG 9136		
Title: Phase I/II the Treatment of Su	Dose Escalating Tro	il of Hyperfractionated Irradiation i		
Start date: 19 Aug	91	Estimated completion date:		
Principal Investiga Terry E. Pick, COL,	tor: MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Department of Pedia	trics	Associate Investigator(s): Reginald Moore, LTC, MC		
Key Words:		- 		
Cumulative MEDCASE (cost:	Estimated cumulative OMA cost:		
Number of subjects e Total number of subj Periodic review date	ects enrolled to day	rting period: _0 te: _0 view results:		
Objective(s): 1) To	determine the feas:	bility of using limited volume		
2) To determine the irradiation to treat	feasibility of using children with poorl	hyperfractionated craniospinal y-differentiated supratentorial al malignant gliomas associated with		
Additional objectives	s as outlined in the	study protocol.		
Technical Approach: protocol.		the schema outlined in the study		

Progress: Study remains open. 0 patients entered into study.

Date: 15 Dec 95 Protocol Number	r: POG 9139 Status: Completed				
Title: A Dose-Escalating Study of Cis Hyperfractionated Irradiation in the T Diagnosed Brain Stem Gliomas.	splatin Used Concomitantly with Treatment of Children with Newly				
Start date: 20 May 91	Estimated completion date:				
Principal Investigator: Allen R. Potter, LTC, MC	Facility: Brooke Army Medical Center, Texas				
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC				
Key Words:					
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:				
Number of subjects enrolled during rep Total number of subjects enrolled to d Periodic review date: R	ate: <u>1</u>				
Objective(s): 1) To determine the acu wit the administration of cisplatin by radio-sensitizer given simultaneously hyperfractionated irradiation regimen stem glioma (BSG).	continuous infusion, to be used as a				
2) To establish the dose level of infu tolerated toxicity when combined with i brain stem.	sional cisplatin that results in maximum hyperfractionated radiotherapy to the				
Technical Approach: Therapy will folloprotocol.	ow the schema outlined in the study				
Progress: Study completed. No patients on followup.					

Date:	15 Dec 95	Protocol N	Number	POG	9140	Status:	Ongoing
Title:	Therapy for R	ecurrent or F	Refract	ory Ne	euroblasto	oma.	
Start d	ate: 25 Feb 9	1		Estim	ated comp	oletion da	ıte:
Principal Investigator: Terry E. Pick, COL, MC				Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Pediatrics						estigator	
Key Wor	ds:						
Cumulative MEDCASE cost:			[Estima	ated cumu	lative OM	A cost:
Total nu	of subjects enr umber of subject review date:	ts enrolled	to date	e: 2			
neurobla	re(s): 1) To do nt regimens use astoma: a) Trea	d to treat pa tment 1 - Hid	atient: qh-dose	with cispl	resistant latin (HD)	t or recu P) with s	rrent

2) To evaluate the efficacy of 13-cis retinoic acid (RA) in prolonging time to progression of disease for patients with resistant or recurrent neuroblastoma who achieve a response following induction chemotherapy.

cisplatin (HD-CBDCA) with VP-16 (VP); and c) Treatment 3 - ifosfamide (IFOS)

- 3) To measure plasma levels of RA attained during therapy and to determine the correlation of these levels with response to treatment and clinical toxicity.
- 4) To measure retinoic acid nuclear receptors (RARs) in tumor tissue and to determine their significance in predicting response to therapy.

Technical Approach: Therapy will follow the schema outlined in the study protocol.

Progress: Study remains open. No new patients.

and MESNA with carboplatin (CBDCA).

Date: 15 Dec 95 Protocol Nu	umber: POG 9151 Status: Ongoing
Title: Intergroup Rhabdomyosarcoma	Study-IV for Stage II & III Diseases
Start date: 17 Aug 92	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during r Total number of subjects enrolled to Periodic review date:	date:
receiving vincristine-actinomycin-D-receiving vincristine-actinomycin-D-	ssion-free survival rates of patients cyclophosphamide (VAC) vs. patients ifosfamide (VAI) vs. those receiving E) for treatment of rhabdomyosarcoma and
Technical Approach: All eligible pation the study protocol.	tient will receive treatment as outlined

Progress: Study remains open for patient enrollment.

Date:	15 Dec 95	Protocol :	Number:	POG 9190	Status: Ongoing
Title: Hodgkir	Intensive Chen's Lymphoma (B	motherapy fourkitt's and	r Stage Non-Bu	III Diffuse U	ndifferentiated Non-
Start d	late: 22 Apr 92		-	Estimated comp	oletion date:
	oal Investigator E. Pick, COL, MC			Facility: Brooke Army Me	edical Center, Texas
Department/Service: Department of Pediatrics			Associate Investigator(s): Reginald Moore, LTC, MC		
Key Wor	ds:				
Cumulat	ive MEDCASE cos	t:		Estimated cumu	lative OMA cost:
TOCAL II	of subjects enr umber of subjec c review date:	ts enrolled	to date	:	
fraction	ng high-dose me	thotrexate, phamide. 2)	in comb	ination with w	Ara-C infusion incristine and evels in serum and CSF
Technica study pr	al Approach: A	ll eligible p	patient	s will be trea	ted as outlined in the
Progress	s: Study remain	ns open for m	patient	enrollment	

Date: 15 Dec 95 Protocol Nu	mber: POG 9193 Status: Ongoing		
Title: Autologous Bone Marrow Trans Hodgkin's Lymphoma	plantation for Recurrent/Refractory Non-		
Start date: 16 Mar 92	Estimated completion date:		
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas		
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC		
Key Words:			
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:		
Number of subjects enrolled during retotal number of subjects enrolled to Periodic review date:	eporting period: date: 1 Review results: Closed to new pts		
Objective(s): 1) To determine the th	Corposition for sikilitary and court to sixilitary		

Objective(s): 1) To determine the therapeutic feasibility and acute toxicity of treatment in patients with recurrent non-Hodgkin's lymphoma receiving high-dose chemotherapy or chemoradiotherapy and rescued with autologous bone marrow transplantation (ABMT). 2) To estimate the survival of patients with recurrent HBL using chemotherapy or chemoradiotherapy followed by ABMT.

Technical Approach: All eligible patients will receive treatment as outlined in the study protocol.

Progress: Study closed to new patient accrual. One patient entered on study. Open for followup purposes only.

Date: 15 Dec 95 Protocol Numb	er: POG 9222 Status: Ongoing	
Title: Mitoxantrone, Etoposide and Cyc Patients with Acute Myeloid Leukemia		
Start date: 22 Apr 92	Estimated completion date:	
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC	
Key Words:	† - -	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	riew results: Closed to new pts	
Objective(s): 1) To determine the remismitoxantrone, etoposide and cyclosporine topoisomerase II messenger RNA levels by to starting therapy. 3) To detect mdrl leukemic blasts.	. 2) To measure mdrl and	
Technical Approach: All eligible patien study protocol.	ts will be treated as outlined in the	
Progress: Study remains open for follow	up of patients only	

Date:]	15 Dec 95	Protocol Numb	er: POG 9225 Status: Ongoing
dose radi	otherapy). 2)	s disease (APE/ To decrease la	a new combined modality therapy in OPPA with integrated "ping pong" low-te toxicity while maintaining of advanced-stage Hodgkin's disease.
Start dat	e: 16 Mar 92		Estimated completion date:
	Investigator: Pick, COL, MC		Facility: Brooke Army Medical Center, Texas
	t/Service: t of Pediatric	s	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words	:		-
Cumulative	e MEDCASE cost	:	Estimated cumulative OMA cost:
Total numb	per of subjects	s enrolled to da	rting period: 1 te: 1 view results: Continue
dose-radic	therapy. 2) T	n's disease (AP To decrease late	ity of a new combined modality therapy E/OPPA with integrated "ping pong" low toxicity while maintaining therapeutic tage Hodgkin's disease.

Technical Approach: Patients less than 21 years of age with histologic proof of Hodgkin's disease will receive therapy as outlined in the study protocol.

Progress: Study remains open for patient enrollment.

Date:

15 Dec 95

Date: 15 Dec 95 Protocol Num	nber: POG 9226 Status: Ongoing
Title: Treatment of Stage I, IIA and Low-Dose Irradiation	I IIIA, Hodgkins Disease with ABVE and
Start date:	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reprotal number of subjects enrolled to describe the reproductive review date:	date: 1
To establish the response (CR & PR) radetermine the incidence of major thera the above regimen. 4) To reduce the m decreasing the efficacy of treatment i correlate the results of clinical, ima surgical/pathological staging where pe	(ABVE) followed by 2550 Cgy irradiation I, II and IIIA, Hodgkin's disease. 2) the following four cycles of ABVE. 3) To apy related immediate and late effects of morbidity associated with therapy without in Early Stage Hodgkin's Disease. 5) To ging, laboratory staging with
Progress: Study remains open for pation	ent accrual.

Date: 15 Dec 95 Protocol Number	r: POG 9243 Status: Ongoing
Title: Treatment for Children with Interesting B (All Ages) and Stages C, D, and	
Start date: 22 Apr 92	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	e:1
Objective(s): 1) To determine and compaexperienced by patients treated on Arm Athe same treatment without G-CSF on POG long-term toxicities associated with tre relationship of specific biological feat on POG #9047, to clinical presentation, To use G-CSF to ameliorate myelosuppress thus potentially to reduce the cost of timprove the dose interval, and therefore to that achieved on POG #8743. 6) To detoxicities associated with the use of G-Technical Approach: All eligible patien	with patients who previously received #8743. 2) To determine the acute and eatment on Arm B. 3) To assess the cures of neuroblastoma, as determined response to therapy, and survival. 4) sion and its associated morbidity, and cherapy. 5) To determine if G-CSF can the dose intensity on Arm A, compared etermine the short and long-term CSF in infants.
Technical Approach: All eligible patien outlined in the study protocol.	ts will be enrolled for therapy as
Progress: Study remains open for patien entered on study.	t enrollment. One patient has been

Date:	15 Dec 95	Protocol	Numbe	r: POG	9259	Status	: Ongoing
Title: Osteosa	Carboplatin in crcoma or Unresec	the Treatmeted Osteos	ent of arcoma	Newly-I	Diagnosed	Metastatio	2
Start d	ate: 16 Mar 92			Estima	ted compl	etion date	:
Princip Terry E	al Investigator: . Pick, COL, MC	·		Facili Brooke		ical Cente	er, Texas
	ent/Service: ent of Pediatric	s	ļ	Associ Regina	ate Inves ld Moore,	tigator(s)	:
Key Word	ds:						
Cumulati	ive MEDCASE cost	:		Estimat	ted cumul	ative OMA	cost:
	subjects enrolled umber of subjects c review date: _	enroried :	TO dat	۰.			
Objectiv presenti	re(s): 1) To est ng with newly-di ment with other	imate the a	respon	se rate	to carbon	7	
Technica unresect protocol	l Approach: All able osteosarcom	eligible p a will rece	patient eive th	ts with nerapy a	metastati s outline	.c disease ed in the s	or study
Progress	: Study remains	open for p	atient	enroll	ment.		

661

Date: 15 Dec 95 Protocol Nu	mber: POG 9264 Status: Ongoing
Title: Chemotherapy Regimen for Ini Lymphoblastic Leukemia - A Pediatric	tial Induction Failures in Childhood Acut Oncology Group Phase II Study
Start date: 16 Mar 92	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date:	eporting period:
survival for initial induction failur regimen. 3) To try and better charac	pased on an induction regimen of To estimate the one-year disease-free es in childhood ALL, based on a new eterize this unique subpopulation of using CDNA probes for the multidrug-

Technical Approach: All patients less than 21 years of age at time of initial diagnosis with acute lymphoblastic (T or B cell lineage) leukemia will receive therapy as outlined in the study protocol.

Progress: Study remains open for patient enrollment.

Date:	15 Dec 95	Protocol Numb	per: POG 9280	Status:	Ongoing
Title:	Neuroblastoma 1	Epidemiology Pro	ptocol		
Start d	ate: 16 Mar 92		Estimated com	pletion date	•
	al Investigator: . Pick, COL, MC	:	Facility: Brooke Army Me	edical Center	c, Texas
	ent/Service: ent of Pediatric	:s	Associate Inve	estigator(s):	:
Key Word	ds:		⊣ 		,
Cumulati	ive MEDCASE cost	:	Estimated cumu	llative OMA c	ost:
iotai nu	umber of subject:	s enrolled to da	orting period: ate: eview results:		
21-2					

Objective(s): To evaluate the relationship between environmental exposures and the occurrence of neuroblastoma. 2) To evaluate the relative importance of risk factors for neuroblastoma reported in previous epidemiologic studies. 3) To collect information on additional potential risk factors that can be used to develop new hypotheses such as parental smoking, parental radiation exposure, family history of cancer, gestational and delivery history. 4) To determine the relationship between environmental factors and host factors by evaluating subgroups of cases defined by biologic factors and clinical

Technical Approach: Study will include majority of cases newly diagnosed in the US and Canada each year who are registered by the two clinical trials groups. Controls will be identified by using random digit dialing procedure. Case and control parents will be interviewed by telephone. Clinical and biologic data will be collected as part of the cooperative group biological and therapeutic protons will be used to define subgroups of patients.

Date: 15 Dec 95 Pro	tocol Number: POG 9310 Status: Ongoing
Title: SIMAL #7: Escalating Relapse of Non-T, Non-B ALL	Rotational Drug Therapy After First Marrow - A Pediatric Oncology Groupwide Pilot Study.
Start date:	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Total number of subjects enro	during reporting period: olled to date: 2 Review results: Continue
acute lymphoblastic leukemia relapse in an extramedullary weekly parenteral drug regime single army pilot study is plus G-CSF to patients with recurrent continuation therapy will allobe active in ALL. 3) To compasparaginase in terms of PEG-	ne event-free survival (EFS) of children with (ALL) following first marrow relapse or first site other than CNS. A rotating, escalating, en will be used for continuation therapy. A lanned. 2) To determine the feasibility of giving tent ALL and whether administration of G-CSF in low for escalation of myelotoxic agents known to pare two induction delivery schedules for PEG-L-L asparaginase pharmokinetics, and surrogate e level, and change in asparaginase antibody 28.
Technical Approach: All eligin the study protocol.	gible patients will receive treatment as outlined
Progress: One patient remain accrual.	as on followup. Study remains open for patient

Date: 15 Dec 95 Protocol Number:	POG 9340/41/42 Status: Ongoing
Title: Treatment of Patients > 365 Day Amplified Stage 2B/3 Neuroblastoma	
Start date:	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Objective(s): 1) To evaluate the responsingle-agent chemotherapy (either taxol, III therapy to two successive subsets of of age with INSS Stage 4 neuroblastoma (stoxicity, event-free survival (EFS), survivated with 6 courses of induction chemo (HDP/VP), cyclophosphamide/Adriamycin/Vin(IFOS/VP), CBDCA/VP, HDP/VP, and CAV plusted to the course of the survival (EFS), survivated with 6 courses of induction chemo (HDP/VP), cyclophosphamide/Adriamycin/Vin(IFOS/VP), CBDCA/VP, HDP/VP, and CAV plusted to the survivate to the survivate of the survivate o	untreated patients (pts) > 365 days (NB). 2) To measure response rates and vival, and patterns of failure, of pts otherapy; high dose platinum/VP-16 (CAV), ifosfamide/VP (CAV),
f autologous bone marrow transplantation yclophosphamide/VP/CBDCA ablation plus leasure EFS, survival, and patterns of fa esponse or partial response or mixed markets.	(ABMT) using

POG 9340/41/42 (continued)

Technical Approach: All eligible patients will receive treatment as outlined in the study protocol.

Date: 15 Dec 95 Protocol Number:	POG 9340/41/42 Status: Ongoing
Title: Treatment of Patients > 365 Days Amplified Stage 2B/3 Neuroblastoma	s at Diagnosis with Stage 4 and N-MYC
Start date:	Estimated completion date:
Principal Investigator: Terry E. Pick, COL, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Pediatrics	Associate Investigator(s): Reginald Moore, LTC, MC
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: Objective(s): 1) To evaluate the response	eview results: Continue
single-agent chemotherapy (either taxol III therapy to two successive subsets of age with INSS Stage 4 neuroblastoma toxicity, event-free survival (EFS), su treated with 6 courses of induction che (HDP/VP), cyclophosphamide/Adriamycin/(IFOS/VP), CBDCA/VP, HDP/VP, and CAV pradiotherapy and autologous bone marrow and the course response rates, toxicity	of untreated patients (pts) > 365 days (NB). 2) To measure response rates a urvival, and patterns of failure, of pemotherapy; high dose platinum/VP-16 Vincristine (CAV), ifosfamide/VP lus G-CSF, followed by local w transplantation (ABMT), (POG #9342).

(HDP/VP), cyclophosphamide/Adriamycin/Vincristine (CAV), ifosfamide/VP (IFOS/VP), CBDCA/VP, HDP/VP, and CAV plus G-CSF, followed by local radiotherapy and autologous bone marrow transplantation (ABMT), (POG #9342).

3) To measure response rates, toxicity, EFS, survival, and patterns of failure of pts whose families decline ABMT, and therefore receive an additional 5 courses of therapy (IFOS/VP, CAV, HDP/VP, CAV, CBDCA/VP) plus G-CSF followed by local radiotherapy to the tumor bed. 4) To further evaluate the toxicity of autologous bone marrow transplantation (ABMT) using cyclophosphamide/VP/CBDCA ablation plus local radiotherapy (POG #9342). 5) To measure EFS, survival, and patterns of failure of pts who achieve a complete response or partial response or mixed response (see Sec. 7.0) at the end of induction chemotherapy prior to ABMT. 6) To further evaluate the biologic parameters of neuroblastoma as required for POG 9047, and to measure MDR-1 protein (P-glycoprotein) levels, which will be obtained at diagnosis and in marrow purgates and/or available tumor tissue during therapy, with correlation to clinical presentation at diagnosis, clinical course, response to therapy, and survival.

Date: 1 Dec 95	Protocol Number:	GOG 26 Status: Ongoing			
Title: Master Protocol Recurrent Pelvic Maligna		ng Studies in Treatment of Advanced,			
Start date: Reopened Fe	eb 91	Estimated completion date:			
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstetrics and Gynecology		Associate Investigator(s): Reginald Moore, LTC, MC			
Key Words:					
Cumulative MEDCASE cost:		Estimated cumulative OMA cost:			
Total number of subjects	enrolled to dat	ting period: 1 (26 LL) te: 1 view results:			
procedures that will be combinations in patients intent is to determine t	performed to scr with advanced in the efficacy of o	s a Phase II design outlining the reen for activity of new agents or drugecurrent pelvic malignancies. Its chemotherapeutic agents in patients			

g whose advanced malignancies have been resistant to high priority methods of treatment.

Technical Approach: This is a study of multiple chemotherapeutic agents. Therapy will follow the schema outlined in the study protocol.

Progress: This study was terminated 23 May 94. However, because there is still one patient on followup, this study remains ongoing for patient followup but is closed to new patient entry.

Date: 1 Dec 95 Protocol Number	: GOG 26-A Status: Ongoing
Title: Master Protocol for Phase II Dr Recurrent Pelvic Malignancies	ug Studies in Treatment of Advanced,
Start date: 16 Mar 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e: <u>0</u>
Objective(s): To evaluate a suggession	of many annual 1 - 1 - 1

Objective(s): To evaluate a succession of new agents (cytoxic drugs, hormones, biologic response modifiers) in a fair and efficient manner, identify active agents and provide the group with this information so that more effective regimens for the treatment of ovarian cancer can be developed.

Technical Approach: The intent of this protocol is to search for activity of new agents or drug combinations in patients with advanced or recurrent pelvic malignancies. Study design will be primarily based on prior GOG experience in the specific disease entities. This will insure consistency in evaluation of response. Therapy plans demonstrating activity will later be compared and investigated in ensuing Phase III studies.

Date: 1 Dec 95 Protocol Number	: GOG 26C Status: Ongoing
Title: A Phase II Trial of Cis-Plating Advanced Pelvic Malignancies	um (NSC #119875) in Patients with
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reportation of subjects enrolled to da Periodic review date: R	te:
Objective(s): To determine the level o	f effectiveness of one of the new dru

Objective(s): To determine the level of effectiveness of one of the new drug agents, cis-platinum for which the true effectiveness in cancer of the female organs has not yet been determined.

Technical Approach: As outlined in the protocol.

Progress: This study was reported as completed by error in 1993. Study remains ongoing for patient accrual.

Date: 1 Dec 95	Protocol Number:	GOG 26-II	Status:	Ongoing
Title: A Phase II Metastatic, or Recu	Frial of 5-Fluoroura rrent Pelvic Maligna	acil and Leucovo	orin in Adva	nced,
Start date: 8 Aug 9	95	Estimated con	mpletion dat	e:
Principal Investigat LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstet	rics and Gynecology	Associate Inv	restigator(s):
Key Words:		† - -		
Cumulative MEDCASE c	ost:	Estimated cum	ulative OMA	cost:
Number of subjects e Total number of subj Periodic review date	ects enrolled to dat			
Objective(s): The production of drugs the treatment of care	urpose of this study treating cancer of are being evaluated	v is to compare the female gent	the effecti	veness of
Technical Approach: protocol.	Therapy will follow	the schema out	lined in th	e study
Progress: This is a	new study. There i	s no available	data.	

Date: 1 Dec 95 Protocol Number:	GOG 26KK Status: Ongoing
Title: A Phase II Trial of Merbarone in Endometrial, Cervical and Epithelial Ov	
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Re	te:
Objective(s): The purpose of this study this single agent in the treatment of call	y is to evaluate the effectiveness of ancer of the female genital organs.
Technical Approach: As outlined in the p	protocol.
Progress: Due to administrative error, to 1993. It should have been listed as one	this study was reported as closing in going for patient accrual.

Date: 1 Dec 95 Protocol Number	: GOG 26-LL Status: Ongoing
Title: A Phase II Trial of Prolonged O Advanced Pelvic Malignancies	ral Etoposide (VP-16) in Patients with
Start date: 22 Apr 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e: 0

Objective(s): To evaluate a succession of new agents (cytoxic drugs, hormones, biologic response modifiers) in a fair and efficient manner, identify active agents and provide the group with this information so that more effective regimens for the treatment of ovarian cancer can be developed.

Technical Approach: The intent of this protocol is to search for activity of new agents or drug combinations in patients with advanced or recurrent pelvic malignancies. Study design will be primarily based on prior GOG experience in the specific disease entities. This will insure consistency in evaluation of response. Therapy plans demonstrating activity will later be compared and investigated in ensuing Phase III studies.

Date: 1 Dec 95 Protocol Number:	GOG 81F Status: Ongoing
Title: A Phase II Trial of Tamoxifen C Recurrent Carcinoma Responsive to Proge	itrate in Patients with Advanced or stins
Start date: 16 Dec 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	•
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e: 0

Objective(s): 1) To determine whether patients with endometrial carcinoma who have responded to medroxyprogesterone acetate and then progressed will respond to a second hormonal manipulation in the form of tamoxifen citrate. 2) To evaluate the level of efficacy (response rate) of tamoxifen in patients with advanced or recurrent endometrial carcinoma not previously exposed to hormonal therapy for their malignancy.

Technical Approach: Patients will receive tamoxifen 20 mg p.o. BID and treatment will be continued until there is evidence of disease progression. Patients will be seen at least once monthly for 3 months after initiation of therapy. If disease process is at least stable, subsequent visits may be less frequent but must occur at least every 3 months.

Date: 1 Dec 95 Protocol Number:	GOG 87 Status: Ongoing
Title: Master Protocol for Phase II Dr Recurrent or Advanced Uterine Sarcomas.	ug Studies in the Treatment of
Start date: 20 May 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e: 0
Objective(s): To identify new agents an	d agent combinations for the treatmen

of patients with recurrent or advanced metastatic sarcoma.

Technical Approach: Therapy for each phase II drug study will follow the schedule outlined in the study protocol. In addition to the master protocol, the study has been approved for 87F - Doxorubicin and Ifosfamide with Mesna.

Progress: No patients have been entered on this study.

Date: 1 Dec 95	Protocol Number:	GOG 87-D	Status: Ongoing
Title: A Phase II Tri Uterine Sarcomas	ial of VP-16 in Pa	tients with A	Advanced or Recurrent
Start date:		Estimated c	completion date:
Principal Investigator	7:	Facility: Brooke Army	Medical Center, Texas
Department/Service: Obstetrics/Gynecology		Associate I	nvestigator(s):
Key Words:		1 	
Cumulative MEDCASE cos	t:	Estimated c	umulative OMA cost:
	ts enrolled to da	te:	
	ing this malignandent to demonstrate	cy. To allow e activity, t	the best possible chance his study constitutes a
Technical Approach:	The study design :	involves treat	ting an average sample

Technical Approach: The study design involves treating an average sample size of 30 evaluable patients per drug studied for each of the following cell type categories: mixed mesodermal tumor, leiomyosarcoma, and other sarcomas. Sections relating to specific agents will be sequentially incorporated into this protocol as each agent is studied.

Progress: This protocol remains open for patient entry. No patients have as yet been enrolled.

Date: 1 Dec 95 Protocol Number	: GOG 87-G Status: Ongoing
Title: A Phase II Trial of Paclitaxel Recurrent Uterine Sarcomas	(Taxol) in Patients with Advanced or
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecolog	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: Re	ite.
Objective(s): Paclitaxel will be admini at an initial dose of 175 mg/m 2 /3 hours should be reduced to 135 mg/m 2 /3 hours radiation therapy.	every 3 weeks. The stanting 3.
Technical Approach: As outlined in the	study.
Progress: This is a new study. There	is no reportable data.

Date: 1 Dec 95	Protocol Number	: GOG 87-H Status: Ongoing
Title: A Phase II Tria		NSC #609699) in Patients with Advanced, s
Start date: 8 Aug 95		Estimated completion date:
Principal Investigator: MAJ Kevin Hall, MC		Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetric	s and Gynecology	Associate Investigator(s):
Key Words:		
Cumulative MEDCASE cost	::	Estimated cumulative OMA cost:
Total number of subject	s enrolled to da	rting period:te:view results:
Objective(s): To evalu		eness of topotecan in treating advanced
Technical Approach: Th	erapy will follo	w the schedule outlined in the study
Progress: This is a ne	w study. There	is no available data.

Date: 1 Dec 95 Prot		
Prot	cocol Number: GOG 90 Status: Ongoing	
Title: Evaluation of Cisplatin, Etoposide and Bleomycin (BEP) Induction Followed by Vincristine, Dactinomycin, and Cyclophosphamide (VAC) Consolidation in Advanced Ovarian Germ Cell Cancer		
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gy	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during reporting period: Total number of subjects enrolled to date: Periodic review date: Review results:		
Objective(s):		
Technical Approach: As outlined in the protocol.		
Progress: This study remains ongoing for patient accrual.		

Date: 1 Dec 95	Protocol Number	: GOG 92 Status: Ongoing
Title: Treatment of After Radical Hyster Therapy vs No Furthe	rectomy and Pelvic	with Stage IB Carcinoma of the Cervix Lymphadenectomy: Pelvic Radiation
Start date:		Estimated completion date:
Principal Investigat LTC Kevin Hall, MC	or:	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstet	rics-Gynecology	Associate Investigator(s):
Key Words:		→
Cumulative MEDCASE co	ost:	Estimated cumulative OMA cost:
Total number of subje	ects enrolled to da	orting period:
factors. 2) To deter	3 carcinoma of the cmine the recurrence patients. 3) To de	ne of adjunctive pelvic radiation in the cervix, but with selected high-risk re-free interval, survival and patterns etermine the morbidity of adjunctive rerectomy.

Technical Approach: As outlined in the protocol.

Progress: This study was reported as being completed in 1993. It should have been reported as ongoing for patient followup but closed to new patient entries.

Date: 1 Dec 95 Protocol Number	: GOG 93 Status: Ongoing
Title: Evaluation of Intraperitoneal C Following Negative Second Look Laparoto (Stage III).	hromic Phosphate Suspension Therapy my for Epithelial Ovarian Carcinoma
Start date: 25 Jul 90	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	:e:
Objective(s): To evaluate the role of i	ntraperitoneal chromic phosphato

Objective(s): To evaluate the role of intraperitoneal chromic phosphate suspension (intraperitoneal "P) therapy in patients with Stage III epithelial ovarian carcinoma who have no detectable evidence of disease at the second-look laparotomy.

Technical Approach: Patients with primary histologically confirmed epithelial carcinoma of the ovary in clinical remission are eligible. Patients with no persistent or recurrent cancer as assessed by surgical, cytologic and histologic findings at the second-look laparotomy likewise are eligible. Therapy will follow the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Date: 1 Dec 95 Protocol Number	: GOG 95 Status: Ongoing
Title: Randomized Clinical Trial for the and II(A,B,C) and Selected Stage IAI & : III).	
Start date: 24 Aug 90	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e:
Objective(s): 1) To compare the progres	sion free interval and overall

survival of the two treatment regimens.

- 2) To determine the patterns of relapse for each form of therapy.
- 3) To define the relative toxicities of the two treatment approaches.

Technical Approach: Patients meeting the eligibility criteria will be treated in accordance with the schema outlined in the study protocol.

Progress: No patients have been entered on this study.

Date: 1 Dec 95 Protocol Number: GOG 99 Status: Ongoing Title: A Phase III Randomized Study of Surgery vs. Surgery Plus Adjunctive Radiation Therapy in Intermediate Risk Endometrial Adenocarcinoma. Start date: 24 Aug 90 Estimated completion date: Principal Investigator: Facility: LTC Kevin Hall, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Department of Obstetrics and Gynecology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: 4 Total number of subjects enrolled to date: 4 Periodic review date: _____ Review results:

Objective(s): 1) To determine if patients with intermediate risk endometrial adenocarcinoma (as defined below), who have no spread of disease to their lymph nodes, benefit from postoperative pelvic radiotherapy.

2) To evaluate how the addition of pelvic radiotherapy will alter the site and rate of cancer recurrence in these intermediate risk patients.

Technical Approach: Patients with primary histologically confirmed Grades 1, 2, and 3 endometrial adenocarcinoma are eligible. Patients must have had a total abdominal hysterectomy, bilateral salpingo-oophorectomy, selective and para-aortic node sampling, pelvic washings and are found to be surgical Stage I and occult Stage II. Myometrial invasion must be present.

Therapy will follow the schema outlined in the study protocol.

Progress: Study remains open for patient enrollment. Four patients have entered study thus far.

Date: 1 Dec 95 Protocol Numbe	r: GOG 100 Status: Ongoing
Title: Monoclonal Antibody Against Fre Persistent Gestational Trophoblastic Di Hydatidiform Mole	e Beta HCG to Predict Development of sease (PGTD) in Patients with
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: 25 Jul 94 Rev	te: <u>1</u>

Objective(s): To measure the serum concentration of free beta HCG and total beta HCG in patients with molar pregnancies in order to determine whether the ratio of free beta HCG to total beta HCG may be of value in predicting which molar pregnancies will undergo spontaneous remission and which will subsequently develop into persistent gestational trophoblastic disease.

Technical Approach: Serum samples will be obtained weekly until a negative assay is attained or until a plateau or rise in titer is observed. A beta HCS will be performed by each institution for their clinical management of the patient. A 5cc aliquot of this serum will be collected and frozen. When the patient is in complete remission or PGTD is encountered, the samples will be sent to the Southern Regional Trophoblastic Disease Center for free beta HCG assay.

Progress: Study remains ongoing for patient followup and data accrual.

Date: 1 Dec 95 Protocol Number	: GOG 102 Status: Ongoing
Title: Master Protocol for Phase II Ir of Minimal Residual Ovarian Malignancie	
Start date: 15 Apr 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Tumber of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	
Objective(s): 1) To determine the activent of the continuous of the intrapers of the continuous cersistent minimal residual disease epithetandard therapy.	ity of various drugs or BRMs alone or

2) To evaluate further the toxicity, systemic and local, of drugs and BRMs or combinations used in this study.

Technical Approach: Therapy for the following arms will follow the schema outlined in the study protocol: 102F - Alpha Recombinant Interferon (AIFN); 102G - Cisplatin and Thiotepa; and 102H - Interleukin-2; and 102N - Intraperitoneal Recombinant Alpha-2-Interferon.

Progress: No patients have been entered on this study.

Date: 1 Dec 95 Protocol Number:	GOG 104 Status: Ongoing
Title: Intraperitoneal Cis-Platinum/In Intravenous Cis-Platinum/Intravenous Cy Measurable (Optimal) Disease Stage III	clophosphamide in Patients with Non-
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Re	te:
Objective(s): The purpose of this study effectiveness and safety of two differer for the treatment of patients with ovaristudy are commonly given intravenously drugs will be given either intravenous conto the space around the stomach and in	nt ways of giving drugs (chemotherapy ian cancer. The drugs used in this (by injection into a vein), one of th or intraperitoneally (placed directly

Technical Approach: As outlined in the protocol.

Progress: This study was closed in 1993 due to error in reporting protocol status. It should have been listed as ongoing to patient accrual.

Date: 1 Dec 95	Protocol Number	: GOG	107	Status:	Ongoing
Title: A Randomized S Patients with Primary (Phase III)	tudy of Doxorubi	cin w	. Done		
Start date:		Est	imated	d completion	date:
Principal Investigator LTC Kevin Hall, MC	:		ility:		enter, Texas
Department/Service: Department of Obstetric	s-Gynecology	Ass	ociate	Investigato	r(s):
Key Words:		 			
Cumulative MEDCASE cost	:	Est	imated	cumulative	OMA cost:
Number of subjects enro Total number of subject Periodic review date: _	s enrolled to da	te.			
Objective(s): To determine whether the addition of cisplatin to doxorubicing offers significant improvement in the frequency of objective response, the duration of progression-free interval, and the length of survival					

0 the length of survival as compared to doxorubicin alone.

Technical Approach: All patients with histologically documented primary Stage III or Stage IV, or recurrent endometrial adenocarcinoma, adenocanthoma, or adenosquamous carcinoma whose potential for cure by radiation therapy or surgery alone or in combination is very poor will be eligible. Measurements by sonography and/or CT scans are acceptable if the mass is sharply defined. Therapy will follow the schema outlined in the study protocol.

Progress: Due to reporting error study was closed in 1993. Study should have been reported as ongoing for patient accrual.

Date: 1 Dec 95 Protocol Numbe	r: GOG 108 Status: Ongoing
Title: Ifosfamide (NSC#109724) and th or Without Cisplatin (NSC#119875) in P. Recurrent Mixed Mesodermal Tumors of t	atients with Advanced Persistent on
Start date: 21 Sep 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	-
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reportation Total number of subjects enrolled to da Periodic review date: Re	te: 0
01-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	

Objective(s): 1) To confirm reported high response rates of advanced or recurrent mixed mesodermal tumors of the uterus to ifosfamide/Mesna. 2) To determine whether the addition of Cisplatin to Ifosfamide/Mesna improves response rates or survival in patients with these tumors. 3) To determine the toxicity of Ifosfamide/Mesna with Cisplatin in patients with these tumors.

Technical Approach: Patient will be hydrated prior to institution of therapy with 1000 cc of normal or one-half normal saline at a rate to maintain urine output at greater than 100 cc/hour. Patients randomized to Ifosfamide without platinum therapy will be instituted with bolus of Mesna 120 mgm/m² 15 minutes prior to the Ifosfamide. Ifosfamide will be administered. After completing the Ifosfamide, the Mesna will be administered by continuous infusion over five days uninterrupted except on subsequent days when Ifosfamide is administered. For patients receiving Cisplatin, platinum administration will precede the Ifosfamide therapy and should be reconstituted to concentration of approximately 1 mgm/cc and infused at a rate of 1 mgm/min.

Date: 1 Dec 95 Protocol	Number:	GOG 109 Status: Ongoing
Adjunct to Radiation Therapy, Ver	sus Radi: nd II-A (Infusion and Bolus Cisplatin as an ation Therapy Alone in Selected Carcinoma of the Cervix Following
Start date: 16 Mar 92	1	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gyneo	cology	Associate Investigator(s):
Key Words:		
Cumulative MEDCASE cost:	E	Estimated cumulative OMA cost:
Number of subjects enrolled during Total number of subjects enrolled Periodic review date:	to date:	: 0
ru) and cisplatin used as an adjun	ict to ra	combination of 5-fluorouracil (5-adiation therapy will improve

Objective(s): 1) To determine whether the combination of 5-fluorouracil (5-FU) and cisplatin used as an adjunct to radiation therapy will improve survival rate or progression-free survival and decrease extra pelvic failure compared to radiation therapy alone in patients with positive pelvic lymph nodes, positive parametrial involvement or positive surgical margins following radical hysterectomy and lymph node dissection for Stages I-A2, 1-B and II-A carcinoma of the cervix. 2) To determine the increase in toxicities due to 5-FU and cisplatin as an adjunct to radiation therapy versus radiation therapy alone.

Technical Approach: All eligible patients will receive therapy as outlined in the study protocol.

Date: 1 Dec 95 Protocol Number	er: GOG 110 Status: Ongoing
Title: A Randomized Comparison of Cisp Dibromodulcitol (NSC#104800) Versus Cis Advanced Carcinoma of the Cervix	platin Versus Cisplatin Plus platin Plus Ifosfamide and Mesna in
Start date: 16 Mar 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: 1
Objective (c) . 1) Me determine is in	

Objective(s): 1) To determine if mitolactol plus cisplatin or ifosfamide plus cisplatin improves response rate, response duration, progression-free interval and/or survival in advanced squamous cervical cancer compared to cisplatin alone. 2) To compare the toxicity of these three regimens in advanced cervical cancer.

Technical Approach: Patients will be stratified according to whether or not they have had prior cisplatin as a radiation sensitizer and by performance status. Under Regimen I, cisplatin 50 mg/m² with hydration will be repeated every three weeks and treatment will continue until disease progresses or until toxicity prohibits further therapy or for a maximum of six courses. Regimen II will include cisplatin plus dibromodulcitol (mitolactol), DBD) and treatment will continue until toxicity prohibits further or for a maximum of six courses. Regimen III will include cisplatin plus ifosfamide (plus mesna). Cisplatin 50 mg/m² with hydration per GOG guidelines plus ifosfamide 5.0 grams/m² in 1 liter of dextrose and saline over 24 hrs plus mesna 6 grams/m² will be given concurrently with ifosfamide and for 12 hrs after every 3 weeks. Mesna should be given as 2 gm/m² in 1 liter of dextrose/saline or normal saline every 12 hours as a separate infusion which can be "piggy-backed" into the intravenous line for the ifosfamide.

Date: 1 Dec 95 Protocol Num	
- Trum	ber: GOG 111 Status: Ongoing
Title: A Phase III Randomized Stud Taxol and Cisplatin in Patients wit Ovarian Carcinoma	y of Cyclophosphamide and Cisplatin vs h Suboptimal Stage III and IV Epithelial
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Aggogiato
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date:	dato.
Objection	

Objective(s): 1) To determine response rate, response duration and survival in suboptimal Stage III and Stage IV ovarian cancer treated with two different platinum-based combination chemotherapy regimens. 2) To evaluate the relative activity and toxicities of a new combination, cisplatin/taxol, as compared to the standard regimen, cisplatin/cyclophosphamide.

Technical Approach: Patients with established ovarian epithelial cancer, suboptimal Stage III and Stage IV will be eligible. All patients must have optimal surgery for ovarian cancer, with at least exploratory laparotomy and appropriate tissue submitted for histologic examination.

Progress: Due to error in reporting this study was reported as closed in 1993. Study remains ongoing for patient accrual and patient followup.

Date: 1 Dec 95 Protocol Numbe	r: GOG 112 Status: Ongoing
Title: A Randomized Comparison of Chem Routine Surveillance in the Management	oprophylaxis Using Methotrexate Versu of the High Risk Molar Pregnancy.
Start date: 15 Apr 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	e: _5
Objective(s): 1) To determine the incid disease after evacuation of the high ris receiving chemoprophylaxis versus those surveillance. 2) To evaluate the toxici 3) To develop a clinical pathologic scor	k molar pregnancy in those patients randomized to usual post evacuation ty associated with chemoprophylaxis.

trophoblastic disease which highly correlates with the serum free beta HCG assay.

Technical Approach: As outlined in the study protocol.

Progress: Data results of the previously enrolled patients are currently not available. Study remains ongoing for patient followup.

Date: 1 Dec 95 Protocol Num	mber: GOG 114 Status: Ongoing
Title: A Phase II Randomized Study of Cyclophosphamide Versus Intravenous C Intravenous Carboplatin Followed by In Cisplatin in Patients with Optimal Sta	isplatin and Taxol Versus High Dose
Start date: Jun 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecolog	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: Re	ate. O
Objective(s): 1) To compare recurrence response, and survival between the star cisplatin/cyclophosphamide and the two cisplatin/taxol and intravenous carbopl intraperitoneal cisplatin in patients we epithelial ovarian carcinoma. 2) To coof the three treatment regimens. 3) To with negative second look and recurrence	e-free interval, complete pathologic ndard regimen: intravenous experimental regimens: Intravenous atin followed by intravenous taxol and with optimal (< 1 cm residual) stage III ompare the toxicities and complications of correlate serial serum CA-125 levels se-free interval.
Technical Approach: Therapy will be adm protocol.	inistered as outlined in the study
Progress: Study remains open for data	accrual.

Date: 1 Dec 95	Protocol Number	:: GOG 115 Status: Ongoing
Title: Bleomycin, E- Tumors of the Ovarian Unclassified Sec Cord	n Stroma (Granulos	atin as First Line Therapy of Malign a Cell, Sertoli-Leydig Tumor, and
Start date: 20 May 9	91	Estimated completion date:
Principal Investigate LTC Kevin Hall, MC	or:	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetr	cics-Gynecology	Associate Investigator(s):
Key Words:		—
Cumulative MEDCASE co	ost:	Estimated cumulative OMA cost:
Total number of subje	cts enrolled to da	orting period: ate: Review results:
Objective(s): To ass cisplatin (BEP) chemo stroma of the ovary a	therapy in patient	of bleomycin, etoposide (VP-16), and ts with malignant tumors of the ovarigimen.
Technical Approach: T	herapy will follow	w the schema outlined in the study

Progress: An error occurred when reporting the status of this protocol. It was reported as complete. It should be ongoing for patient accrual.

Date: 1 Dec 95 Protocol Number		
Title: Evaluation of Adjuvant VP-16 a Resected Ovarian Dysgerminoma	nd Carboplatin Therapy in Totally	
Start date: 20 May 91	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:	- 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report otal number of subjects enrolled to dat deriodic review date: Re	rting period:	
bjective(s): 1) To evaluate the effect hemotherapy in patients with completely valuate the acute and chronic toxicity eproductive function.	of adjuvant VP-16 and carboplatin	
echnical Approach: Therapy will follow cotocol.	the schema outlined in the study	
cogress: Study was reported in March : een reported as ongoing for patient acc		

Date: 1 Dec 95 Protocol Number	: GOG 117 Status: Ongoing	
Title: Adjuvant Ilfosfamide and Mesna Completely Resected Stage I or II Mixed	with Cisplatin in Patients with Mesodermal Tumors of the Uterus.	
Start date: 22 Jul 91	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	:e: <u>0</u>	
Objective(s): 1) To determine whether of determine the recurrence rate in patient II mixed mesodermal tumors of the uterus	s with completely resected stage I or	
2) To determine whether postoperative ch surgery alone in local (pelvic) control	emotherapy is more effective than of these tumors.	
Technical Approach: Therapy will follow protocol.	the schema outlined in the study	
Progress: Study remains open for patient	enrollment.	

Date: 1 Dec 95 Protocol Nu	mber: GOG 118 Status: Ongoing
	Value of antineoplastic Drug Resistance
Start date: 22 Jul 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecol	
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during re Total number of subjects enrolled to Periodic review date:	porting period: 0 date: 0 Review results:
Objective(s): To evaluate the	ation between response to chemotherapy
	low the schema outlined in the study
Progress: Study remains open for pat	ient enrollment.

	: GOG 119 Status: Ongoing	
Title: A Study of the Use of Provera a Advanced, Recurrent, or Metastatic Endo	nd Nolvadex for the Treatment of metrial Cancer.	
Start date: 22 Jul 91	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repor	ting period: 0	
Total number of subjects enrolled to dat Periodic review date: Rev	e: <u>0</u> iew results:	
Objective(s): 1) To determine the effic- intermittent administration of Provera [®] (patients with recurrent or metastatic end	Medroxyprogesterone Acetate) in dometrial carcinoma.	
2) To determine the side effects of such disease.	treatment in patients with this	
Technical Approach: Therapy will follow protocol.	the schema outlined in the study	
Progress: Study remains open for patient enrollment.		

Date: 1 Dec 95 Protocol Numb	
Title: A Randomized Comparison of Hyd Infusion and Bolus Cisplatin Versus We Therapy in Patients with Stages II-B, and Negative Para-Aortic Nodes	ekly Cisplatin as Adiunct to Padiation
Start date: 20 Apr 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	T
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: Re	te: 0

Objective(s): 1) To determine whether hydroxyurea, hydroxyurea, 5-FU infusion and bolus cisplatin, or weekly cisplatin is superior as a potentiator of radiation therapy in locally advanced cervical carcinoma. 2) To determine the relative toxicities of hydroxyurea, hydroxyurea, 5-FU infusion and bolus cisplatin, or weekly cisplatin given concurrently with radiation therapy.

Technical Approach: Patients with untreated cervical carcinoma Stages II-B, III-A, III-B and IV-A, who have fulfilled the eligibility requirements according to Section 3.0 will receive pelvic radiotherapy as outlined and will be randomized according to regimens outlined in study protocol.

l Number: GOG 121 Status: Ongoing
Dose Megestron Acetate (Megace) in Advanced
Estimated completion date:
Facility: Brooke Army Medical Center, Texas
Associate Investigator(s):
·
Estimated cumulative OMA cost:
reporting period: _0 to date: _0

Objective(s): 1) To determine the response rate and progression-free interval in patients receiving high dose megestrol acetate (Megace) for advanced or recurrent endometrial carcinoma. 2) To determine the toxicity of high dose megestrol acetate in such patients. 3) To determine if estrogen/progesterone receptor status is predictive of response.

Technical Approach: Patients will take orally two tablets at breakfast, two tablets at lunch and one tablet at dinner for a total daily dose of 800 mg. Therapy will continue as outlined in the study protocol.

Date: 1 Dec 95 Pro	tocol Numb	per: GOG 122	Status: Ongoing
Title: Whole Abdominal Radio	therapy Venerapy in A	rsus Circadian-Ti	med Combination al Carcinoma
Start date: 19 Nov 91		Estimated comple	etion date:
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Med:	ical Center, Texas
Department/Service: Department of Obstetrics and	Gynecology	Associate Invest	cigator(s):
Key Words:			
Cumulative MEDCASE cost:		Estimated cumula	tive OMA cost:
Number of subjects enrolled de Total number of subjects enro. Periodic review date:	lled to dat	te: 0	
Objective(s): 1) To compare to interval) and failure patterns carcinoma (< 2 cm residual disversus combination doxorubicing compare the incidence and type the two treatment regimens.	s in patien sease) trea 1-cisplatin	its with stages II ited with whole ab	-IV endometrial dominal irradiation
Technical Approach: Therapy w protocol.	vill be adm	inistered as outl	ined in the study
Progress: Study remains open	for data a	ccrual.	

Date: 1 Dec 95 Protocol Number	r: GOG 123 Status: Ongoing
Title: A Randomized Comparison of Radin Patients with Bulky Stage IB Carcino	iation Therapy and Adjuvant Hysterectomy oma of the Cervix, Phase III
Start date: 19 Nov 91	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
-	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	te: 0
Objective(s): 1) To determine if weekly regional control and survival when added	v cisplatin infusion improves local to radiation therapy plus

extrafascial hysterectomy. 2) To determine the relative toxicities of these two treatment arms.

Technical Approach: In this study, we plan to compare the addition of weekly

rechnical Approach: In this study, we plan to compare the addition of weekly cisplatin infusion with current apparent better arm of Protocol #71; radiation therapy plus adjuvant hysterectomy in patients with bulky Stage IB carcinoma of the cervix.

Date: 1 Dec 95 Protocol Numbe	r: GOG 125 Status: Ongoing
Title: Extended Field Radiation Therap Cisplatin Chemotherapy in Patients with Aortic Lymph Nodes, Phase II	y with Concomitant 5-FU Infusion and Cervical Carcinoma Metastatic to Para
Start date: 27 Jan 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	e: 1
Objective(s): Patients with uterine cer	vical carcinoma who have biopsy

Objective(s): Patients with uterine cervical carcinoma who have biopsy confirmed para-aortic lymph node metastases will receive combination chemotherapy consisting of displatin and 5-FU intravenous infusion concomitantly with pelvic and para-aortic extended field radiation therapy.

Technical Approach: All patients with primary, previously untreated, histologically confirmed, invasive carcinoma of the uterine cervix (squamous, adenosquamous and adenocarcinoma and all clinical stages (except clinical Stage 111A and IVB), with metastasis to para-aortic lymph nodes proven by cytologic or histologic means will receive therapy as outlined in the study protocol.

Date: 1 Dec 95	Protocol Number:	GOG 126-B	Status: Ongoing
Title: Evaluation & Refractory Ovaria	of Cisplatin & Cyclo an Cancer	sporin in Recurrer	nt, Platinum Resistar
Start date:		Estimated comple	etion date:
Principal Investiga LTC Kevin Hall, MC	itor:	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obste		Associate Invest	igator(s):
Key Words:			
Cumulative MEDCASE	cost:	Estimated cumula	tive OMA cost:
Total number of sub	enrolled during repor jects enrolled to dat e: Rev	e:	
cyclosporin in patie ovarian cancer who h	estimate the antituents with recurrent, nave failed on higher and degree of toxicents.	platinum-resistant priority treatmen	t or refractory
Technical Approach:	As outlined in the	study protocol.	
Progress: This protoccurred to date.	cocol remains open for	r patient entry.	No enrollments have

Date: 1 Dec 95 Protocol Number:	GOG 126-C Status: Ongoing	
Title: A Phase II Evaluation of Altreta Recurrent, Platinum-Resistant and Refrac	amine (Hexamethylmelamine) in ctory Ovarian Cancer	
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: <u>March 1995</u> Re	te:	
Objective(s): This protocol is to estime altretamine in patients with recurrent, ovarian cancer who have failed on higher determine the nature and degree of toxic patients.	platinum-resistant or refractory priority treatment protocols and to	

Technical Approach: As outlined in the protocol.

Date: 1 Dec 95 Protocol Number	: GOG 127-F Status: Ongoing	
Title: Evaluation of Topotecan in Per Carcinoma of the Cervix	sistent or Recurrent Squamous Cell	
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to desperiodic review date:	ate:	
with persistent or recurrent squamous of	otocols. 2) To determine the nature and	
Technical Approach: As outlined in the	protocol.	
Progress: This is a new study. There i	is no reportable data.	

Date: 1 Dec 95 Protocol Number:	GOG 127-H Status: Ongoing	
Title: Evaluation of Prolonged Oral Et Recurrent Squamous Cell Carcinoma of th	oposide (VP-16) in Persistent or de Cervix	
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Re	te:	
Objective(s): The purpose of this study activity of prolonged oral etoposide (VF recurrent squamous cell carcinoma of the priority treatment protocols. 2) To detactive to prolonged oral etoposide (VF	2-16) in patients with persistent or cervix who have failed on higher termine the nature and degree of 2-16) in this cohort of patients.	
Fechnical Approach: As outlined in the	protocol.	
Progress: This is a new study. There i	s no reportable data	

Date: 1 Dec 95	Protocol Numbe	er: GOG 128-B Status: Ongoing			
Title: Evaluation of Portion of Portion of Carcinoma of the Cervix	aclitaxel in Per and Vagina	rsistent of Recurrent Non-Squamous Cell			
Start date:		Estimated completion date:			
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstetrics	and Gynecology	Associate Investigates			
Key Words:					
Cumulative MEDCASE cost:		Estimated cumulative OMA cost:			
Number of subjects enrol. Total number of subjects Periodic review date:	ETITOLIEU EU GSE	ting period: _0 e: _0 riew results:			
Objective(s): 1) To estimate with persistent or recurr DES-associated clear cell	imate the antitument non-squamou adenocarcinoma	mor activity of paclitaxel in patients s cell carcinoma of the cervix and of the vagina and cervix who have			
Technical Approach: As o	utlined in the p	protocol.			
Progress: This is a new	study. There is	s no reportable data.			

oral Etoposide (VP-16) in the Treatmen arcinoma				
Estimated completion date:				
Facility: Brooke Army Medical Center, Texas				
Associate Investigator(s):				
Estimated cumulative OMA cost:				
rting period: 0 ce: 0 riew results:				

Objective(s): 1) To estimate the antitumor activity of oral VP-16 in patients with metastatic or advanced endometrial carcinoma who have failed on higher priority treatment protocols. 2) To determine the nature and degree of toxicity of oral VP-16 in this cohort of patients.

Technical Approach: Etoposide (VP-16) will be administered orally at a dosage of 50 mg/m²/day, day 1-21 every 4 weeks. Patients will be instructed to return capsule card to insure protocol compliance. Patients who have received prior radiation will be treated at 30 mg/ 2 .

Progress: Study closed to new patient entry June 1994. There is no reportable data at this time.

Date: 1 Dec 95 Protocol Num	ber: GOG 129-C Status: Ongoing
Title: Evaluation of Paclitaxel (Tersistent Endometrial Carcinoma	axol) in the Treatment of Recurrent or
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during : Total number of subjects enrolled to Periodic review date: <u>March 1995</u>	o date:
endometrial carcinoma who have faile	study is to estimate the antitumor atients with persistent or recurrent ed on higher priority treatment protocols see of toxicity of paclitaxel in this
Technical Approach: As outlined in	the protocol.

Date: 1 Dec 95 Protocol Number:	GOG 130-B Status: Ongoing				
Title: Evaluation of Paclitaxel (Taxol Recurrent Mixed Mesodermal Tumors of th) in the Treatment of Advanced or me Uterus				
Start date:	Estimated completion date:				
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas				
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):				
Key Words:	† - -				
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:				
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>1 Dec 95</u> Re	:e:				
Objective (a) . The manage of the					

Objective(s): The purpose of this study is to estimate the antitumor activity of paclitaxel (Taxol) in patients with persistent or recurrent mixed mesodermal tumors of the uterus who have failed on higher priority treatment protocols and to determine the nature and degree of toxicity of paclitaxel in this cohort of patients.

Technical Approach: As outlined in the protocol.

Date: 1 Dec 95 Protocol Numbe	er: GOG 131-B Status: Ongoing
Title: A Phase II Trial of Prolonged Metastatic or Advanced Leiomyosarcoma	Oral Etoposide (VP-16) in Patients with of the Uterus
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during reprotal number of subjects enrolled to or Periodic review date: <u>1 Dec 95</u>	date:
of oral VP-16 in patients with metasta uterus who have failed on higher prior	ady is to estimate the antitumor activity atic or advanced leiomyosarcoma of the rity treatment protocols and to determine or al VP-16 in this cohort of patients.
Technical Approach: As outlined in t	the protocol.
Progress: This is a new study. There	is no reportable data.

Date: 1 Dec 95 Protocol Number	: GOG 132 Status: Ongoing			
Title: A Phase III Trial of Taxol at T Levels in Platinum-Resistant Ovarian Ca	hree Dose Levels and G-CSF at Two Dos			
Start date: 18 May 92	Estimated completion date:			
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):			
Key Words:				
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:			
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	e: 0			

Objective(s): 1) To determine the relative efficacy of regimens consisting of taxol versus cisplatin versus a combination of the two drugs in patients with suboptimally debulked stage III & IV epithelial ovarian cancer. 2) To determine which of the three regimens contribute most favorably to progression-free interval and survival. 3) To compare the incidence of audiologic sequelae and other toxicities arising from any of the three regimens.

Technical Approach: Once patient eligibility is determined, therapy will continue as outlined in study protocol.

Date: 1 Dec 95 Protocol Numb	per: GOG 134 Status: Ongoing			
Title: Evaluation of Drug Sensitivity Viability Assay (ATP-CVA)	-			
Start date: 18 May 92	Estimated completion date:			
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):			
Key Words:				
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:			
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	0. 0			

Objective(s): 1) To determine if the dose of taxol affects response rate, progression-free interval or survival in patients with platinum-resistant ovarian cancer. 2) To compare the toxicities of the three regimens. 3) To compare the efficacy and toxicity of two dose levels of G-CSF (5 ug/kg/day $\frac{\text{versus}}{\text{mg/m}^2}$). 4) To determine the relationship between peak taxol plasma concentration and toxicity/response.

Technical Approach: Patients with <u>platinum-resistant</u> ovarian epithelial cancer stage III and stage IV will receive therapy as outlined in the study protocol.

Date: 1 Dec 95 Protocol Numb	per: GOG 135 Status: Ongoing
Title: Evaluation of Drug Sensitivity Viability Assay (ATP-CVA)	
Start date: 18 May 92	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e. 0
Objective(s): 1) To evaluate the correl	

Objective(s): 1) To evaluate the correlation between the ATP-cell viability assay (ATP-CVA) and patient response to chemotherapy in untreated primary epithelial ovarian carcinoma. 2) To correlate laboratory results with the achievement of Pathologic CR at time of 2nd look surgery. 3) To correlate laboratory results with progression-free survival. 4) To correlate single agent and combined agent in vitro studies with clinical outcome.

Technical Approach: Patients with primary ovarian epithelial carcinoma who are eligible will receive therapy as outlined in study protocol.

Date: 1 Dec 95 Protocol Number	r: GOG 136 Status: Ongoing				
Title: Acquisition of Human Ovarian and be Used in Studying the Causes, Diagnos	d Other Tissue Specimens and Serum to is, Prevention and Treatment of Cancer				
Start date: 22 Jun 92	Estimated completion date:				
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas				
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):				
Key Words:					
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:				
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e: <u>0</u>				
Objective(s): 1) To accomplish the coll specimens and serum within GOG participa repository for long-term storage of ovar make available through the Cooperative H tissue and serum for proposed projects c (internal bank) and by researchers nation	ting institutions. 2) To provide a rian tumor, tissue and serum. 3) To fuman Tissue Network (CHTN), tumor conducted by GOG Investigators				

Technical Approach: All eligible patients who have had ovarian tumor tissue removed including all epithelial tumors, germ cell, sex cord stromal and other primary ovarian malignancies will receive therapy as outlined in the study protocol.

Date: 1 Dec 95				Status:	Ongoing
Title: A Randomized Tr. Replacement in Women with	ial of Estroger th Stage I or I	Replace	ment Ther trial Ade		
Start date:		Estim	ated comp	letion date	:
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Medical Center, Texas			
Department/Service: Department of Obstetrics	/Gynecology	Associate Investigator(s):			
Key Words:		-			
umulative MEDCASE cost:		Estima	ted cumul	ative OMA c	ost:
umber of subjects enroll otal number of subjects eriodic review date:	ed during repo enrolled to da Re	rting pe: te: view resu	riod:		
ojective(s): To determi ecurrence-free and overa ndometrial adenocarcinom	no blance				apy on ge I or II
echnical Approach: As or	utlined in the	study pr	otocol.		
ogress: This protocol 1					

Date: 1 Dec 95	Protocol Numbe:	r: GOG 138	Status:	Ongoing		
Title: A Phase II Trial Extraovarian Peritoneal			mide in the	Treatment o		
Start date: 21 Sep 92		Estimated comp	pletion date	e:		
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Medical Center, Texa				
Department/Service: Department of Obstetrics	and Gynecology	Associate Investigator(s):				
Key Words:						
Cumulative MEDCASE cost:		Estimated cumu	ılative OMA	cost:		
Number of subjects enrol Total number of subjects Periodic review date:	enrolled to dat	e: <u>0</u>				
Objective(s): To determ patients with extraovari a combination of cisplat	an peritoneal se	rous papillary				
Technical Approach: Oncinitiated as outlined in			eligible, tr	reatment will		
Progress: Study remains	open for data a	ccmal				

Date: 1 Dec 95 Pr	otocol Numbe	r: GOG 139	Status:	Ongoing
Title: A Randomized Study timed Doxorubicin Plus Cisp Recurrent Endometrial Adend	piatin in Pat	cin Plus Cisplat cients with Prima	in Versus C ary Stage I	ircadian- II & IV,
Start date:		Estimated comp	pletion dat	e:
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Me	edical Cent	er, Texas
Department/Service: Department of Obstetrics/Gy	necology	Associate Inve	estigator(s)):
Key Words:		- 		
Cumulative MEDCASE cost:		Estimated cumu	lative OMA	cost:
Number of subjects enrolled Total number of subjects en Periodic review date:	rolled to da	te. 1		
Objective(s): 1) To determ chemotherapy offers significated response, the duration of pro- survival as compared to stan determine if there are any so- circadian-timed delivery of delivery of doxorubicin-cisp	cant improver rogression-fi ndard doxorub significant d doxorubicin-	ment in the frequence interval, and cicin-cisplatin differences in to	uency of ob d the lengt chemotherap	jective h of y. 2) To
rechnical Approach: As outl	lined in the	study protocol.		
Progress: This protocol rem	- Post for partell eller. Une nation anyollog			ent enrolled

Date: 1 Dec 95 Protocol Number	er: GOG 143 Status: Ongoing	
Title: Familial and Reproductive Fact	cors in Ovarian Cancer	
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics/Gynecology	Associate Investigator(s):	
Key Words:	 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to de Periodic review date: Re)ta.	
Objective(s): 1) Compute prevalence racolon and uterus in first- and second-decases. 2) Identify that subset of multifor linkage analysis studies in the comby fitting major gene models to familian Determine if established reproductive racology (OC) use, tubal ligation) after risk in 5) To collect and store a blood sample storage and subsequent gene frequency a	etes for cancer of the ovary, breast, degree relatives of ovarian cancer sicase families who would be candidates apanion GOG Protocol 144. 3) Estimate all ovarian cancer incidence. 4) sisk factors (parity, oral contraceptive women with a positive family history.	
Technical Approach: As outlined in the	study protocol.	

Progress: Study remains open for patient enrollment.

Date: 1 Dec 95 Protocol Number: GOG 145 Status: Ongoing

Title: A Randomized Study of Surgery Versus Surgery Plus Vulvar Radiation in the Management of Poor Prognosis Primary Vulvar Cancer and of Radiation Versus Radiation and Chemotherapy for Positive Inguinal Nodes

Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:	- 	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during repo Total number of subjects enrolled to da Periodic review date: <u>1 Dec 95</u> R	te:	

Objective(s): The purposes of this study are: (1) to evaluate the role of post-operative vulvar irradiation in addition to vulvar surgery for control of the primary and progression-free interval and survival in patients with vulvar cancer with high-risk factors for vulvar relapse; (2) to assess whether the addition of concurrent chemotherapy to ipsilateral inguinal and pelvic nodal irradiation improves inguino-pelvic control and survival in patients with carcinoma of the vulva with positive inguinal nodes; (3) to determine the comparative rates of inguinal and femoral nodal involvement in node-positive patients; (4) to determine the frequency of patient-reported symptoms, and assess several quality of life components including: physical function, social and emotional well-being and sexual function; (5) to determine any association between histological subtype (basaloid/warty/typical) of the primary lesions and various endpoints, including lymph node metastasis and tumor recurrence; and (6) to determine any association between location (medial/lateral/multifocal) of the primary lesion and various endpoints, including lymph node metastasis and tumor recurrence.

Technical Approach: As outlined in the protocol.

Date: 1 Dec 95 Protocol Numb	er: GOG 146C Status: Ongoing
Title: Evaluation of Topotecan (SKF 1 Sensitive Ovarian Cancer	04864-A) in Recurrent, Platinum-
Start date:	Estimated completion date:
Principal Investigator: MAJ Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics/Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: Rev	
Objective(s): The purpose of this study of Topotecan in patients with recurrent, have failed on higher priority treatment and degree of toxicity of Topotecan in t	v is to estimate the antitumor activity platinum-sensitive ovarian cancer who
Technical Approach: As outlined in the	study protocol.
Progress: Study closed to patient ent	ry. No patients enrolled

Date: 1 Dec 95			
		er: GOG 149	39
Title: A Randomized Stu- Cisplatin Bleomycin, Ifo Persistent Squamous Cell			e and Mesna Versus B, Recurrent or
Start date:		Estimated comp	oletion date:
Principal Investigator: LTC Kevin Hall, MC		Facility: Brooke Army Me	dical Center, Texas
Department/Service: Department of Obstetrics and Gynecology		Associate Inve	stigator(s):
Key Words:			
Cumulative MEDCASE cost:		Estimated cumul	lative OMA cost:
Number of subjects enrolled Total number of subjects of Periodic review date:			
Objective(s): 1) To deter cisplatin (BIP) improves r interval and/or survival i treatment with cisplatin r of these two regimens in a	in advanced squared	response duratio amous cervical c	n, progression-free

Technical Approach: As outlined in the schema of the study protocol.

Date: 1 Dec 95 Protocol Number	r: GOG 150 Status: Ongoing
Title: A Phase III Randomized Study of Abdominal Radiotherapy (AHWAR) Versus Consplatin in Optimally Debulked Stage I the Uterus	ombination Ifosfamide-Mesna with
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e:

Objective(s): 1) To compare treatment outcomes (survival and progression-free interval) and failure patterns in patients without stages I-IV carcinosarcoma (CS) of the uterus (≤ 1 cm residual disease) without extra-abdominal distant disease treated with AHWAR versus cisplatin and ifosfamide/mesna. 2) To determine and compare the incidence and type of acute and late adverse events observed with the two treatment regimens.

Technical Approach: The whole abdomen will be treated with AP-PA parallel opposed fields to a total dose of 3000 Cgy. The pelvis will then be treated by a 4-field box technique to a total pelvic dose of 5000 Cgy.

Date: 1 Dec 95 Protocol Number: GOG 151 Status: Ongoing Title: A Phase II Trial of Intraperitoneal Paclitaxel (Taxol) as Salvage Therapy in Patients with Small Volume Residual Ovarian Cancer Following Initial Systemic Chemotherapy Start date: Estimated completion date: Principal Investigator: Facility: LTC Kevin Hall, MC Brooke Army Medical Center, Texas Department/Service: Associate Investigator(s): Department of Obstetrics-Gynecology Key Words: Cumulative MEDCASE cost: Estimated cumulative OMA cost: Number of subjects enrolled during reporting period: __ Total number of subjects enrolled to date: _ Periodic review date: 1 Dec 95 ___ Review results: Objective(s): The purpose of this study is to determine the surgically defined objective response rate of intraperitoneal paclitaxel when administered on a weekly schedule to patients with small volume residual carcinoma following initial systemic chemotherapy and to further evaluate the

ovarian cancer, carcinoma of the fallopian tube or primary peritoneal safety of intraperitoneal paclitaxel administered on a weekly schedule as a salvage treatment program to patients with ovarian cancer.

Technical Approach: As outlined in the protocol.

Date: 1 Dec 95 Protocol Number:	: GOG 152 Status: Ongoing	
Title: A Phase III Randomized Study of (Paclitaxel) (NSC #125973) with Interva Cisplatin and Paclitaxel in Patients wi Ovarian Carcinoma	al Secondary Cytoreduction Versus	
Start date:	Estimated completion date:	
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):	
Key Words:	1	
·		
rumulative MEDCASE cost: Estimated cumulative OMA cost:		
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>1 Dec 95</u> Re	te:	
Objective(s): The purposes of this stude a second surgery during chemotherapy impadvanced ovarian cancer and to determine	proves survival in patients with	

quality of the patient's life.

Technical Approach: As outlined in the protocol.

Date: 1 Dec 95 Protocol Number	r: GOG 153 Status: Ongoing
Title: A Phase II Study of Recurrent Treated with Alternating courses of Mc Citrate (Novaldex)	and Advanced Endometrial Carcinoma egestrol Acetate (Megace) an Tamoxifen
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date: <u>1 Dec 95</u>	·
Objective(s): The purpose of this stud response rate and progression-free inte megestrol acetate (Megace) and tamoxife the toxicity of alternating megestrol a	rval in patients receiving alternating
echnical Approach: As outlined in the	protocol.
Progress: This is a new study. There	is no reportable data.

Date: 1 Dec 95 Protocol Number:	GOG 154 Status: Ongoing
Title: Human Immunodeficiency Virus (H Cervical Carcinoma	IV) Testing in Patients with Invasive
Start date:	Estimated completion date:
Principal Investigator: LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics-Gynecology	Associate Investigator(s):
Key Words:	
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during report Total number of subjects enrolled to dat Periodic review date: <u>1 Dec 95</u>	te:
Objective(s): The purpose of this study comparing the clinical course, response regimens for HIV-positive women to those disease status; (2) to correlate HIV serpathologic, epidemiologic and demographs frequency of positive HIV serostatus amorphesent with invasive cervical cancer are Technical Approach: As outlined in the	to therapy and toxicity of therapeutice for HIV-negative women with similar costatus with various clinical, ic factors; and (3) to determine the ong patients age 50 or under who ad who consent to HIV testing.
Progress: This is a new study. There is	s no reportable data

Date: 1 Dec 95	Protocol Numb	er: GOG 155 Status: Ongoing	
to determine the natur	V-infected pati re and degree o	on and Isotretinoin with or without ents with invasive cervical carcinoma and toxicity and effect on immune status of the cohort or without zidovudine in this cohort	
Start date:		Estimated completion date:	
Principal Investigator LTC Kevin Hall, MC	::	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetri	cs-Gynecology	Associate Investigator(s):	
Key Words:			
Cumulative MEDCASE cos	t:	Estimated cumulative OMA cost:	
rocar manager of subject	LS enrolled to	i porting period: date: Review results:	
		udy is to determine the antitumor	

Objective(s): The purpose of this study is to determine the antitumor activity of alpha-interferon and isotretinoin with or without zidovudine (AZT) in HIV-infected patients with invasive cervical carcinoma and to determine the nature and degree of toxicity and effect on immune status of alpha-interferon and isotretinoin with or without zidovudine in this cohort of patients.

Technical Approach: As outlined in the protocol.

	OG 156 Status: Ongoing	
Date: 1 Dec 95 Protocol Number. Gos 130		
Title: Randomized Trial of Pelvic Radia in Stage IB, Stage IC, IIA and IIB Endomized IC, IIA and IIIB Endomized IC, IIIA AND IIIA AND IIIB ENDOMIZED IC, IIIA AND	ation Versus Doxorubicin Plus Cisplatin metrial Carcinoma	
Start date:	Estimated completion date:	
Principal Investigator: . LTC Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas	
Department/Service: Department of Obstetrics-Gynecology	Absociate Investigator(s): 	
Key Words:		
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:	
Number of subjects enrolled during report Total number of subjects enrolled to da Periodic review date:R	te:	
Objective(s): To compare the recurrence and overall survival rates in women with confined to the uterus who receive post pelvic irradiation or systemic chemothetic cisplatin.	operative adjuvant therapy with either	
Technical Approach: As outlined in the	protocol.	
Progress: This is a new study. There is	is no reportable data.	

Date: 1 Dec 95	Protocol Numbe	r: GOG 157	Status: Ongoing
Title: A Randomized PP 175 mg/m ² A 21 days x3 with Selected Stage IC	Course Versus the	Same Decrimon	3/6 Canana - 1 1
Start date:		Estimated com	mpletion date:
Principal Investigator: MAJ Kevin Hall, MC		Facility: Brooke Army M	Medical Center, Texas
Department/Service: Department of Obstetric	s and Gynecology	Associate Inv	restigator(s):
Key Words:			
Cumulative MEDCASE cost	:	Estimated cum	ulative OMA cost:
Number of subjects enrol Total number of subjects Periodic review date:	s enrolled to dat	e •	
Objective(s): The purpo of two different drugs,	ose of this study paclitaxel (Taxo	is to compare 1) and carbopla	two different courses
Technical Approach: Once will be as outlined in t	the patient has	been determine	
Progress: This is a new	study. There i	s no reportable	o data

Date: 1 Dec 95 Protocol Number	r: GOG 158 Status: Ongoing
Title: A Phase III Randomized Study of Optimal Stage III Epithelial Ovarian Car Hour Infusion) Versus Cisplatin and Pacl Carboplatin and Paclitaxel (3-Hour Infus	rcinoma: Cisplatin and Paclitaxel (2 litaxel (96-Hour Infusion) Versus
Start date:	Estimated completion date:
Principal Investigator: MAJ Kevin Hall, MC	Facility: Brooke Army Medical Center, Texas
Department/Service: Department of Obstetrics and Gynecology	Associate Investigator(s):
Key Words:	•
Cumulative MEDCASE cost:	Estimated cumulative OMA cost:
Number of subjects enrolled during repor Total number of subjects enrolled to dat Periodic review date: Rev	e:
Objective(s): To evaluate whether any other the control of ovarian cancer is better the control of the control	

used.

Technical Approach: Once the patient has been determined eligible, treatment will be as outlined in the schema of the protocol.